Stringing Pearls

Chapters

Regulations, best practices, and helpful hints about:

Program, Activities and Routines

We come now to perhaps the most important part of the guidebook. This section discusses aspects of a well-run child care center.

A center's written philosophy and goals are the first step. Your center's appearance reflects your philosophy and goals. Play equipment, facility design, and staff interactions carry out your philosophy and goals.

A center's program consists of three ingredients:

(1) THE PLAN. Planning must be consistent with the philosophy and goals of the program and the ages of children enrolled. Staff must be flexible enough to adjust their plans to the individual and changing needs of children.

(2) THE PHYSICAL ENVIRONMENT. The center's equipment and learning materials will help you effectively implement the program plan.

(3) THE SOCIAL ENVIRONMENT. Center staff must treat children in a developmentally appropriate manner consistent with the center's philosophy and goals. The center staff must also coordinate with the child's parents. Parents are the child's primary care givers.

We discuss the plan and the physical environment in Chapters 5 and 6. We discuss social environment in Chapters 7, 8, and 10. Chapter 9 addresses rest periods, evening care, field trips, and transportation.

Chapter 5. WAC 388-295-2010

Activity Program

A center is not only a business and a service to parents, but also a service for children. A child-centered environment consists of:

(1) Staff working closely with children and observing them carefully, following their lead when possible.

(2) Stimulating, challenging activities available throughout the day.

(3) Children choosing activities.

(4) Program scheduling, layout, and procedures that are best for the child.

Needs All Children Share

DCCEL encourages meeting the needs of children in a variety of ways. We encourage centers to offer care consistent with their own personal style and philosophy. Early childhood professionals agree that all child care environments need to respond to the following:

Emotional Needs

Children need opportunities to:

- Feel loved and respected, without having to earn it.

- Feel safe and secure. If they have a problem too big to handle they must be confident that help will be there.
- Feel powerful, independent, and comfortable with their own limits: Willing to take risks without being reckless.
- Be treated fairly.
- Be listened to with respect.
- Make mistakes without feeling shamed or embarrassed.
- Feel secure in what is expected of them and what they can expect from others.
- Learn how to do things for themselves as much as possible.

Intellectual Needs

Children need opportunities to:

- Explore and ask questions.
- Come up with their own answers, in their own time.
- Learn about their world through all their senses.
- Create things and think of ideas.
- Explore the world of fantasy and make-believe: Learn the difference between pretend things and things that are real.
- Use real-life materials and tools in appropriate and constructive ways.
- Be challenged at their own developmental level, whether they are intellectually average, gifted, or delayed.

Social Needs

Children need opportunities to:

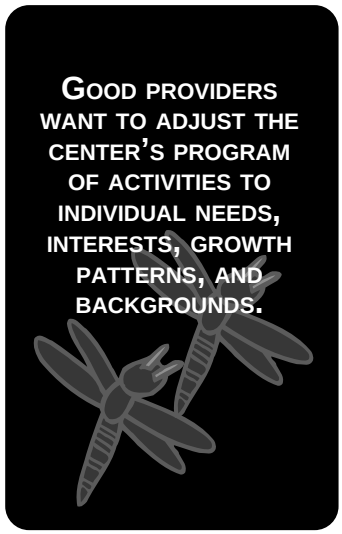
- Feel pride in themselves, their families, and their cultures.
- Interact frequently and comfortably with adults.
- Have opportunities for time alone and time with others, depending on their moods and interests.
- Organize their own activities, and at other times have activities organized for them.
- Learn how to solve problems with other children without using aggression.
- Learn how to cooperate.
- Observe.
- Learn to respect individual, family, and cultural differences.
- Learn about their cultural heritage

and the cultures of others through toys, pictures, foods, books, and positive presentations.
- Learn that rules exist so people can live together comfortably and fairly.
- Learn to accept limits.
- Learn what it means to be a friend.

Physical and Health Needs

Children need opportunities to:

- Move about freely in an environment free from physical harm or disease. Through touch and movement, children express themselves, experience their world, and learn.
- Practice newly developing small muscle and large muscle skills.
- Learn how to take good care of their bodies, so they can keep themselves strong and healthy.
- Have active times and quiet times, depending on their mood and energy level.
- Sit, play, and lie down in a variety of positions and on a variety of surfaces. Examples of hard surfaces include a variety of plastic, wood, and metal chairs, tables floors etc. Soft surfaces include floor cushions, padded chairs, carpets, and soft floor furniture.
- Learn how to recognize, avoid, and respond to dangerous situations.



A Bird's Eye View of Developmentally Appropriate Practices

Effective providers care for children in a way that is sensitive to children's needs, wants, and abilities. We call this responsive care "developmentally appropriate."

What does a "developmentally appropriate" program look like? In chapter 3, the term "developmentally appropriate" has two parts, age appropriate and individually appropriate. A similar division appears in the next two sections of this chapter.

Children develop in stages. For each stage, we describe care for children in that particular age group. Then we discuss the need for providers to know more than just how old a child is. Providers must get to know children as individuals. Good providers want to adjust the center's program of activities to individual needs, interests, growth patterns, and backgrounds.

Infants (1 to 12-month-olds)

Emotional Needs

Infants are developing a beginning sense of trust and attachment. You need to know each of your babies as an individual. Some infants will want lots of stimulation in the

form of play, eye contact, movement, and cuddling. Others may show signs of distress at the same activity.

Infants have a limited number of ways they can signal what they want. They need to know you understand and will respond appropriately. This means noticing a frustrated infant and redirecting them to a new toy or situation. It may mean taking over-stimulated infants off to a quiet corner and holding them close.

Respond quickly and appropriately to a very young child's cries of distress or signals for play. You will then foster a sense of trust in the child.

Infants increasingly recognize familiar objects and people. Having their own crib, blankets, pacifiers, and such is comforting to them. Limit the number of objects and people in the environment so infants become comfortable with them.

Encourage infants in their accomplishments. Help them become competent. When older infants injure themselves or get sad or scared, care givers should provide comfort and sympathy. Then encourage the children to resume independent activities.

Intellectual Needs

During the first six months of life, infants gradually notice the world around them. Young infants are learning all the time. Their curriculum is the interactions you have with them and the things going on around them. Being fed or dressed are learning opportunities for the infant.

Infants are beginning to follow objects visually. They will start to reach for objects that are colorful and within their visual field.

Infants are sensitive to sounds in their environment and will try to locate the source. Soft, soothing sounds can calm an infant. Harsh or sudden noises will produce frightened or startled responses.

Before six months, infants largely depend on their care givers to provide the opportunities to experience things. Providers carry them to new locations regularly. As infants grow older and become mobile, they can choose more activities for themselves. The provider serves as a partner, perhaps slowly introducing new elements to the activity if the child seems interested.

As children approach their first birthday, they love to put things into containers and then take them out. They also like to stack things and then knock them down. Keep older infants' play equipment down low and in familiar places. They increasingly move about the environment with confidence and purpose.

Older infants start to pay more attention to the names of things like body parts, objects, and people in environment. They are more interested in picture books and stories.

Social Needs

A good provider spends lots of time at the infant's level. This may mean holding them up or sitting on the floor with them. Most infants will look for hugs, smiles, and laughter. They also like laps to sit on and a body to climb over.

Care for infant needs such as feeding and diaper changing becomes a social and teaching occasion. This is especially important since a provider caring for several infants is often busy with what appears as routine maintenance (see also Chapter 19).

Conversation is always interesting to young infants and very important. Researchers in language development show that infants do engage in simple forms of turn-taking even at birth. Remember to talk to infants about what you are doing, what you are going to do, and what is happening around them.

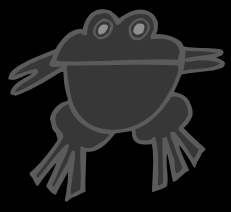
How you speak with infants is important. Talk, sing, and read to young children often. Providers should imitate and respond to the infant's sounds and gestures, treating them as communication. Later, you can take the child's first attempts at words and phrases and expand them into complete sentences and questions.

Play with words and sounds. Develop predictable routines, familiar songs, and personal games. Infants increasingly anticipate and look forward to these events and learn their "role" in the exchanges.

Providers should encourage contact between infants, but providers should also be careful to protect younger infants from the explorations of older, mobile ones.

From gentle "Nos" and patient redirection, older infants learn acceptable actions. This is the beginning of self-discipline.

KEEP TOYS WITH SMALL PIECES, PLASTIC BAGS, AND OTHER POTENTIALLY HARMFUL OBJECTS SAFELY OUT OF INFANTS REACH.



Physical and Health Needs

As infants grow you will notice their periods of alertness lengthening. Time between feedings also increases. Providers will need to continually adjust to the infant's individual feeding and sleeping schedule.

Carry infants, moving about gently. Infants need a chance to exercise their arms and legs. They need to experience varying body positions. They may enjoy massages, tickles, etc.

Infants grasp objects first by accident. Later they begin intentionally reaching for objects they see. Gradually, they notice their own body.

Infants will potentially put anything in their mouth. Providers must take extreme

care to keep objects sanitary and floors clean. They must also keep toys with small pieces, plastic bags, and other potentially harmful objects safely out of infants reach.

Older infants become more mobile, exploratory, and social. They begin to pull themselves up on furniture. They crawl, and climb small stairs and low ramps. They also begin walking with assistance. Providers should encourage exploration, while being watchful to help or protect as needed.

Toddlers (1 to 2-1/2-year-olds)

Emotional Needs

Toddlers need opportunities to explore, be responsible, and make significant choices. Challenge and discipline them in ways that keep their dignity intact.

Toddlers begin to want to do things for themselves such as feeding and dressing. Providers encourage them to do so and are tolerant of mistakes. Providers plan the toddler activity schedule to allow for independence.

Toddlers often respond to situations without being aware of their emotional state. Providers should help toddlers sort out their feelings by giving labels to the times when a child is scared, angry, or proud.

Older toddlers can accept limits. This is the beginning of self-discipline. Behavior management occurs through modeling, redirection, and praising appropriate behavior.

Intellectual Needs

Toddlers view the world with wonder and look to providers for explanations. Providers stand ready to encourage exploration of safe situations and discourage exploration of unsafe ones.

Toddlers do things for the sake of doing them, not to get them done. Once they complete a task, they often start all over again.

Toddlers love books and songs, especially old familiar ones. Providers read to toddlers regularly, often one-to-one with the child on their lap. They discuss pictures and provide words.

Toddlers use art materials for the physical and sensory experience. They do not represent objects or produce a product. Asking toddlers to explain their drawings is inappropriate.

Toddlers enjoy lots of cheerful pictures at their eye level. Realistic pictures of animals, people, and familiar objects will draw their attention and encourage language. Pictures of the children and their families on display help bridge the gap between home and the center.

Social Needs

Toddlers' speech is developing rapidly. Providers listen carefully and with interest to what toddlers have to say, repeating and expanding their messages. Providers realize that toddlers don't always understand verbal messages. They depend more on modeling, practice, and familiar routines.

Toddlers are increasingly interested in their peers, but often play in parallel rather than in coordinated activity. Providers model the type of interactions with others they

want children to develop. Providers step in quickly when there are disputes to provide information, solve problems, or redirect children to new activities.

Providers display play materials down low to encourage toddlers to choose independently. Providers show toddlers how to clean up after themselves. They thank them when they do so, and encourage their cooperation.

Toddlers do not yet understand the idea of sharing. Providers lessen struggles by providing more than one of many play materials and equipment.

Physical and Health Needs

Toddlers are always on the move. They move themselves up, down, and through anything. They also delight in moving anything else they can. They need suitable objects and furniture to practice their rapidly developing large and small motor skills.

Toddlers enjoy sitting at tables and using chairs for activities and meals if you give them child-sized equipment.

Preschoolers (2-1/2 to 5-year-olds)

Emotional Needs

Preschoolers are beginning to learn about feelings. They can learn it is all right to feel silly, sad, and angry. Providers help them be aware of what they are feeling and give their feelings names. They help children feel comfortable with their feelings and find positive ways of showing them.

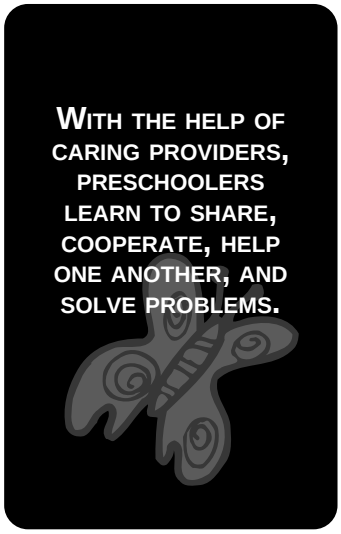
Many preschoolers develop fears. Typical fears at this age include the dark, animals, imaginary beings, sounds, and new situations. Providers address these fears calmly and do not make fun of them.

Preschoolers enjoy surprises, jokes, and celebrations of all kinds. In general they are purposeful, outgoing, friendly, and a joy to work with.

Intellectual Needs

Preschool children are natural explorers. They are eager to find out how things work and why. They ask endless questions and want to share with you and each other their new-found knowledge. Providers are careful to let children discover information on their own and at their own pace. Avoid supplying answers and correcting mistakes.

Preschoolers learn the names for things that interest them, often after hearing the name only once. Preschool children can become experts on topics of interest to them such as dinosaurs. Providers make sure the environment is rich in both written and verbal language. They label different parts of the environment so children can see how words look as well as hear how they sound.



Preschoolers are amazingly aware of their physical surroundings. If providers don't know who a mitten on the floor belongs to, they know the children can probably tell them.

Real and pretend confuse preschool age children. Providers help them sort out the difference. Providers are also truthful with children.

Preschoolers enjoy puzzles and problems. They have lively imaginations and love to pretend, dress up, and create long dramas and stories. Preschoolers love good storytelling, not just having books read to them. They gradually focus less on the pictures in books and more on the images they create in their minds.

Preschoolers' drawings and other creations begin to be image-oriented and purposeful, often with an underlying story or theme. Providers encourage children to talk about what they have done and give them space to display their work.

Social Needs

Preschool children are learning social skills. They are learning how to respect the rights of others. With the help of caring providers, preschoolers learn to share, cooperate, help one another, and solve problems. Over time, preschoolers begin looking to each other rather than providers for opinions and approval.

Preschoolers are beginning to play in groups and develop friendships. Learning how to be a friend is a slow and painful process. Providers are there to help when children's friends tell them "You can't come to my birthday party!"

Preschoolers are learning to respect the rights of others and to use words to settle arguments. These skills take time to learn. Quarrels and fights are a normal part of the growing up process. Providers help children work through their own solutions rather than serving as the judge and jury for disputes.

Preschoolers want more choices of what to do and ways to use their time. They enjoy having the freedom to decide what to do next and whom to do it with.

Preschoolers are learning the power of words and what it means to say you will do something. Providers encourage preschoolers to state their intentions out loud. Providers hold the children to their promises and commitments.

Physical and Health Needs

Preschoolers learn by using their bodies. A program based on worksheets, desk work, and drills is inappropriate.

Preschoolers need lots of active play. They work hard at learning new large motor skills like climbing, skipping, and catching a ball. They also devote a lot of time and attention to mastering cutting, drawing, and sewing. Preschoolers like to use their new-found skills to do things for themselves. They put on their own shoes and socks, zip a coat, wash their hands, or set a table.

Because preschoolers are curious explorers, providers discuss with them safety rules and explain possible dangers. Preschoolers then find it easier to accept the limits placed upon them.

School-Age Children (5 to 12-year-olds)

Emotional Needs

Providers often see the school-age child after the child has put in a long day at school. These children may be noisier, messier, and need more choices than younger children. The school-age child will likely be less tolerant of confusion. They may be more prone to conflicts. They will be hungry! Providers recognize that these children may want many choices of activities. They need spaces that contrast with their experiences in a structured school program.

School-age children are more sensitive to what others think of them. If providers find it necessary to reprimand them, they do so quietly and privately, asking the child to step aside for a moment.

School-age children like predictability. They like to plan, know what to expect, and when to prepare for changes in the routine.

Intellectual Needs

The school-age child is beginning to become an independent thinker. They are good at suggesting improvement in activities for their groups. Games that require skill and strategy are popular.

School-age children are increasingly interested in current events, social issues, and moral dilemmas. However, they also are very sure of their opinions and intolerant of alternative viewpoints. Providers respect their opinions, offer alternative viewpoints, and help them see all sides of an issue.

School-age children enjoy learning how to make things. They enjoy opportunities to work on real projects with real materials and tools. They may be perfectionists and product-oriented.

School-age children become intensely interested in particular topics and in learning more about them. They are now able to read. Reading becomes a powerful liberating tool. They enjoy being more independent with adults. They can read for entertainment or research a topic of interest. Providers recognize that in many areas the children's skills and knowledge is beginning to exceed their own.

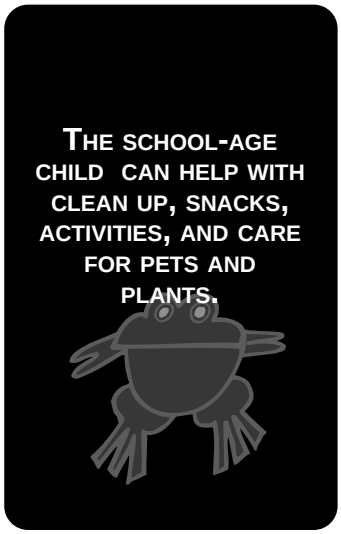
School-age children are increasingly able to regulate their own activity cycles and plan their own schedules. Their concentration level is greater. They may also have homework to do. Providers make sure they have quiet spaces to do their homework if they wish.

Social Needs

School-age children need a sense of belonging. Their sense of personal and cultural identity is becoming more defined, yet they are still highly vulnerable to each others' opinions. Peer approval can be more important to them than that of adults.

School-age children begin to develop lasting and more intense friendships. They may have a best friend with whom they can share personal thoughts and feelings. As they grow older, school-age children develop their own rules about acceptable clothes, music, and vocabulary.

Providers give school-age children a sense that they belong and model the kinds of behavior they expect from them. They greet the children and acknowledge their arrival at the center. They do a lot of active listening and let children solve their own problems. They know when to just listen, when to help solve problems, and when to direct.



Clear limits and expectations are important. School-age children test providers. They count on staff to enforce rules and follow through in a consistent way.

School-age children love competitive games. Providers also introduce a variety of cooperative activities to encourage positive feelings toward the group. Opportunities to organize and participate in group projects are valuable learning experiences.

The school-age child likes to feel important and be helpful and responsible. They can help with clean up, snacks, activities, and care for pets and plants. Providers tell children what a help they are and how they appreciate the jobs the children are doing.

Physical and Health Needs

Most school-age children sit all day in a structured classroom. Physical activity is important for their mind and body. Providers give them lots of space and opportunities to play outside where they can run, shout, and practice large motor skills. Give them a wide variety of outdoor equipment and organized games.

Many school-age children are on the road to becoming accomplished crafters, artisans, gymnasts, cooks, and musicians. Providers show appreciation for children's gifts and support them when they falter or doubt themselves.

School-age children are learning to care for their bodies. They know safe ways of moving, jumping, and falling to minimize injuries. Discussions about hygiene, safety, and nutritious foods are important steps toward developing healthy habits and safe practices. Providers also realize school-age children may experiment with cigarettes, drugs, or sex. Providers talk with children calmly about these issues and share accurate information.

Allowing for Individual Differences in Preferences and Abilities

All children do not develop at the average rate. Keep in mind:

- For many skills, the developmental range in a same-age group may be two years or more.

- You may have individual children with unusual interests or skills outside the age range of the group.
- You may have children with special needs who require special modifications to the environment in order to do certain activities.

In addition, children differ in how comfortable they are with different activities. The provider needs to be sensitive to cultural and individual differences in children's preferences and learning styles. For example:

- Some children learn well by listening. Others need to do something before they understand fully.
- Some children can sit still for long periods. Others need to be free to move about.
- Some children want to be able to do an activity perfectly before sharing their accomplishment. Others are more comfortable with the trial and error approach.
- Some children are very outgoing and outspoken with adults. Others are uncomfortable when an adult is speaking to them or watching them.
- Some children don't like being told what to do. Others need to hear exactly what is expected of them.
- Some children play comfortably in a group. Others prefer to play alone.
- Some children can't wait to crawl into your lap. Others are uncomfortable with being touched.

Children need opportunities to repeat activities. With repetition, children have a better chance to:

- Gain increased confidence, skill, and feelings of achievement.
- Refine and expand their knowledge and awareness.
- Do activities independently.

Repeating an activity should be the child's decision, not the provider's.

Children prefer a choice of activities. Early childhood experts emphasize that child-initiated, child-directed, provider-supported play is critical. A developmentally appropriate program must provide for:

* Activities children can choose and play with independently.
* Free play.
* Individual activities.
* Exploration and creativity.
* Choices.

Children learn best when they choose activities they find meaningful. The provider's role in child-chosen activity is to:

(1) Prepare the environment with a variety of interesting, culturally diverse activity choices that cover a range of skill levels.
(2) Help children find activities they are likely to find challenging and satisfying.
(3) Listen and observe as children play with materials.
(4) Help children's further exploration and learning by:
    - Asking meaningful questions.

- Making suggestions.
- Adding more complex materials or ideas to the situation.

(5) Avoid taking control of the play.

Total group instruction is not a very effective way of teaching children things or handling problems. Most conversations should be with individual children or small groups, so:

- Tailored conversations exist among children and providers.
- Children are more likely to be listening and interested.
- Children have more opportunity to express their own thoughts and opinions to the providers and to each other.

As you can see in the samples we provide, the written version of the activity schedule can be very general. It divides the day into blocks of time and describes what typically happens during those times. Give this written schedule to each family at the time of enrollment. Post it in the center as well (see Chapters 10 and 36).

The written schedule describes a typical day, not what happens every day. Base activity periods on the interest and enthusiasm of the children, not the clock. Special events such as field trips, a special art project, a rainy day, or birthday celebrations will change the schedule of the day. It is, however, good practice to post notices of special events ahead of time for parents' information.

Planning Ahead for Ongoing Activities

If lead providers for each group of children are going to prepare activities that are interesting and age appropriate, they need to devote time to:

- Planning activities ahead of time, consulting with the program supervisor as necessary.
- Coordinating with other staff members about their contributions to the curriculum.
- Making sure all materials and equipment are on hand and in good working order.
- Practicing the activity, so the presentation to the group will be smooth and interesting.

There are disadvantages in making your own sample to show children. They may feel the purpose of the activity is to make a product that looks like yours. Children are often disappointed in their own product compared to yours.

Daily Schedule

7:00 – 7:30	Center Opens, Breakfast, Greetings
7:30 – 9:00	Free Time
9:00 – 9:30	Circle Time, Songs, Stories, etc.
9:30 – 9:45	Snacks
9:45 – 9:50	Wash Up
9:50 – 10:50	Small and Large Muscle Activities
10:50 – 11:45	Group Activities
11:45 – 12:15	Lunch
12:15 – 12:30	Getting Ready to Rest, Mats Out
12:30 – 1:30	Quiet Time or Nap Period
1:30 – 3:00	Free Time and Outdoor Play, depending on the weather
3:00 – 3:15	Circle Time
3:15 – 3:30	Snacks
3:30 – 4:30	Group Activities
4:30 – 5:00	Free Time, Coloring and Painting, or Stories
5:00 – 5:30	Center Closes, Farewells

NOTE: ALL CHILDREN NEED TO BE PICKED UP NO LATER THAN 5:30 p.m.

Activities in the center include the following:

pre-reading skills	playdough
art activities	cutting
singing	gluing
puppetry	cooking
field trips	music
special visitors	stories
nature walks	dancing
games	and more

Each month parents can read the Newsletter and Calendar for a schedule of planned activities.

Present activities so children exercise their own imagination and creative abilities. Let them know that it's okay that what they create looks different. Express appreciation for the range of ideas and abilities they express.

Ideas for interesting and age appropriate activities come from a variety of sources. Among the resources your center uses may be:

- Ideas generated in staff meetings.
- Ideas from workshops, resource books, or other centers.
- Activity plans from previous years.
- Curriculum suggestions from the program supervisor.
- Resource and Referral's resource library.
- Local provider associations.
- The public library.
- A local community college or vocational school with an early childhood education program.
- A nationally available set of curriculum materials. Examples are Creative Curriculum, Explorations, the Active Learning Series, or a church-related curriculum, etc. (See Resource section for details) In this case, the activity plan would indicate the planned schedule for introducing various activities from the curriculum packet.
- A teaching model or philosophy offering its own detailed activity suggestions, for example, High Scope, Montessori, etc.

Allowing staff adequate planning time is one way a center can ensure a quality program. Planning time is especially important for the lead providers in each group. You can encourage lead providers to spend time planning activities by including time specifically set aside for this purpose in their work schedule. For example, you might:

- *Pay them to work eight hours a day but have them be in charge of children seven hours.*
- *Free them from child care responsibilities during some portion of the day. For example, give release periods during lunch time, outside time, or nap time. Make sure, however, that you maintain staff to child ratios, either by using substitutes or with existing staff.*
- *Schedule time each week for the full staff in charge of a group to meet for at least half an hour.*

Lead providers will often spend generous amounts of their own time planning projects, gathering and making materials, and practicing activities. Keep in mind:

- *These preparations are vital for them to perform their job well.*
- *Children would suffer if providers neglected these duties.*
- *They deserve to be compensated for all services they perform.*

Avoid planning or preparation time in a nap room. Staff in charge of a group of napping children are responsible to the children. On any given day, there is no guarantee that all the children will rest quietly. Therefore, the provider may not be able to do any of their own planning or activity preparation during that time.

Television

Television can be a positive and appropriate part of your program. Use it wisely and sparingly. Programs that are worth viewing should:

- Have educational as well as entertainment value.
- Encourage worthwhile values and beliefs.
- Add to children's understanding of themselves and their world.
- Present men and women from a variety of ethnic groups as competent.
- Cover content and themes which children have an opportunity to explore more actively in other parts of the program.

TV is inappropriate for infants and toddlers.

Some guidelines for TV use in your center:

- Use at appropriate times.
- Turn on the TV only when a program is a planned part of your curriculum.
- Turn the set off when the program is over.
- Don't use TV as a baby-sitter or as a substitute for large motor activities on rainy days. Set a center policy on the total amount of television time you allow per week.
- Always watch the program with children, and follow up with a discussion afterwards.
- Monitor use of video games.

ALWAYS WATCH THE PROGRAM WITH CHILDREN, AND FOLLOW UP WITH A DISCUSSION AFTERWARDS.

If possible, videotape the program ahead of time. This allows you to:

- Preview the material to make sure the content is suitable for your group.
- Stop the tape at different points or save the rest of the program when the group loses interest.
- Wind past the commercials at viewing time.
- Make the program part of your center's curriculum resources.

Documenting Ongoing Activities

Written evidence of activity planning in a high quality program helps staff:

- Assure themselves, the director, parents, and the licensor that the program reflects the center's philosophy and goals, and meets the full range of children's needs.
- Benefit from past successes and failures. There is always room for improvement in any program.

A licensor cannot be at your center every day to see the program you offer children. The provider must have available for inspection written records which indicate what activities the center has:

* Introduced recently.
* Planned for the present time period.
* Planned for the days ahead.

A licensor can look at your written plans, materials you set out, and the activities going on, checking that the activities you planned are:

- Adequate to meet the full range of children's needs.
- Actually taking place.

Licensors will want to see enough evidence of activity planning to decide whether the center is fulfilling its stated goals.

The form of the activity record plan will vary. You may want to use:

- A wall chart for the week or month.
- A clipboard with pages divided by times of the day or activity areas.
- A large, desktop monthly calendar.
- A teacher planning calendar book.

Whatever form your planning records take, they should indicate the date and which group the plans are for.

One of the program supervisor's primary responsibilities is to help staff plan activities. The program supervisor should be available to assist staff in:

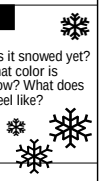
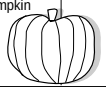
- *Locating resources for activity ideas.*
- *Planning activities and an activity schedule appropriate for a particular age group.*

STRINGING PEARLS SAMPLE ACTIVITY SCHEDULES

Toddler's Weekly Activity Schedule & Lesson Plan

	MONDAY	*TUESDAY*	*WEDNESDAY*	*THURSDAY*	*FRIDAY*
9:00 am Group Time Activities	*Stories "Raffi" Songs* 	*Stories "Sesame Street" Songs*	*Stories "Goldilocks" Songs*	*Stories "Three Little Pigs"*	*Stories "Raffi" Songs*
9:30 am Large Motor Activities	*Dancing Round-in-the-Circle*	*Exercise Wiggle Wobble*	*Dancing Balance Beam*	*Exercise Zoom Tube*	*Doncing Round-in-a-Circle*
10:00 am Language Skills	*Picture cards Parts of the Body*	*Picture cards Numbers* 	*Picture Cards Parts of the Body*	*Picture Cards Happy -Sad Faces*	*Picture Cards Colors and Shapes* 
10:30 am Table Top Activities	*Legos Toys*	*Waffle Blocks Toys*	*Transport Toys*	*New Giant Blocks Toys*	*Blocks and Cars and Puzzles*
12:00 am Story Time Buggyrides	*Climber Buggy Books*	*Climber Buggy Books*	*Climber Buggy Books*	*Climber Buggy Books*	*Climber Buggy Books*
12:30 – 2:30 pm			*QUIET TIME*		
3:30 pm Arts and Water Table	*Chalk Coloring Happy Faces*	*Crayons*  *Sunshine Moon Star*	*Playdough*	*Finger-paint Markers*	*Crayons Chalk*
4:00 pm Sand and Water Table	*Waterplay Riding Toys*	*Rice Climber*	*Balance Beam Birdseed*	*Bubbles Climber* 	*Shaving cream Riding Toys*
4:30 pm Group Time Activities	*Dress-up Hats and Clothes*	*Flannel Board Animals*	*Bubbles Stories*	*Sing-a-Long Flannel Board*	*Dress-up Hats and Clothes* 

Monthly Activity Schedule for 5 yr. old group

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1 Find some leaves to play in. Feel them–are they soft? Squishy? Hard? 	***2*** Does your family have an emergency escape plan?	***3*** Donate some food to your local food pantry.Why is it important to help other people?	***4*** Fingerpaint. What happens when you mix different colors together?	***5*** What can you do to make the air cleaner for yourself and for others?
8 Don't throw away old pots and pans–they make great musical instruments	***9*** What did you do special today? Clap for yourself–you're a special person!	***10*** Play follow the leader with a long piece of string or yarn.	***11*** What can you bake in a muffin tin? (Besides muffins or cupcakes)	***12*** Look in the newspaper for something special to do this weekend.
15 Look out the window. What's going on outside today?	***16*** Learn a new fingerplay. 	***17*** Wear something with stripes going up and down or across.	***18*** Have you set out bird seed for winter birds?	***19*** Play ball with a rolled-up pair of socks.
22 Get up close to a cold window and breathe on it. What happens?	***23*** What kinds of clothes do you wear at this time of year to keep you warm?	***24*** Wear red and green today. Can you find other objects in these same colors.	***25*** Pour oatmeal into a large pan or lined box to make an indoor "sandbox."	***26*** Has it snowed yet? What color is snow? What does it feel like? 
29 Recycle paper towel tubes:Paint in bright colors and hum through it–a noisemaker!	***30*** Draw a face on your pumpkin using colored markers–this is safer and cleaner than carving.	***31*** How much does your pumpkin weigh? 		

PRESCHOOL ACTIVITY AREA

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
ART	Collage, out of paper scraps Goal: develop small motor skills and creative expression	Playdough vegetables / Shapes Goal: develop small motor skills, classification	Finger painting Goal: creative expression, sensory activity	Lacing strawberry basket Goal: develop eye-hand coordination, small motor skills	Sponge painting Goal: creative expression
CIRCLE TIME	Flannel board story Five Little Valentines Goal: develop language skills	Finger play "Where is Thumbkin" Goal: develop language skills	Poem– "I Am a Top" Goal: large motor development	Talk about children from different cultures Goal: multicultural development	Flannel board story "Monkies on the Bed" Goal: develop language skills
MUSIC	Song: Paper of Pins Goal: develop language skills	"Shake My Sillies Out" Goal: develop large motor skills	Learn La Raspa, a Mexican dance Goal: multi-cultural develpment	Snowflake song Goal: creative expression	"Head, shoulders, knees and Toes" Goal: develop language skills
TABLE ACTIVITIES	Water table: washing dishes, tension relief. Goal: sensory experience	Cooking banana bread Goal: Cognitive development, temporal ordering	Make a group card for a child in the hospital Goal: social development, maintain social bonds with child	Bean bag game, throw in rings Goal: develop large motor skills	Making jello Goal: to develop cause and effect learning, foster initiative
STORY	"The Circus Baby" Goal: language development	"Blueberries for Sal" Goal: language development	"What Whiskers Did?" wordless book Goal: develop language fluency	"The Snuggle Bunny" Goal: emotional competence	"Whistle for Willie" Goal: Multi-ethnic development
CIRCLE TIME	Lotto game: seasons Goal: cognitive development of grouping skills	Set up Montessori Cylenders Goal: Practice separated ordering	Dropping beans in bottle with tweezers Goal: fine motor development, eye-hand coordination	Animal Lotto Goal: matching skills	Use balance scale to measure quantities Goal: provide practice in matching

- *Deciding how and where to set up an activity.*
- *Acquiring necessary supplies.*
- *Evaluating the success of the activity afterwards.*
- *Maintaining the program activity plan records.*

It is useful to hold onto your program activity records for a full 12 months. That way, your program records can become a good resource for the staff a year later, providing valuable ideas about:

- *Seasonal activities.*
- *Specific topics children enjoyed learning about.*
- *Great art projects or terrific science explorations.*
- *Interesting field trips or visitors.*

The activity plan serves as a handy list of shelf activities, group games, books, songs, art projects, cooking projects, etc., that help children explore a topic. The notes are more valuable if:

- There are indications of the success of the various activities and how to improve them.
- They are self-explanatory.
- You store a diagram, stencil, or sample with the materials. A picture is worth a thousand words.

Keep a file on different themes and subjects.

Over time, the program activity records become a better and better curriculum resource for staff. This makes the program supervisor's job easier. It also helps to make the program richer and more developmentally appropriate.

Transitions Between Areas and Activities

Adjusting the curriculum to the needs of children means not only offering the right activities at the right time, but also allowing enough time for children to do the activities. Infants and toddlers determine the pace and length of activity .

A well-planned activity schedule gives children time to settle into activities and pursue their interests fully before they clean up and go to the next activity. If an activity is new, allow extra time to set it up and introduce it to the children.

As much as possible, allow children to pursue their interests without interrupting or hurrying them. There are times when the group as a whole needs to move on to a new phase of the day. There are ways you can make these necessary transitions easier for children:

- Tell the group in advance when the activity will end and what comes next.
- When it is time to move on, give children a chance to repeat what they are doing one more time before requiring them to stop. Avoid stating "That's all!" Give a warning signal, such as:
  "You have one more minute."
  "One more time."
  "When you are finished, please put your things away."
  "This will be your last time. Ready? Go!"
- Encourage children who are finished with their activity to help straighten the room or help set up the next activity. This gives children something positive to do during the transition. It encourages responsibility. Tell them how much you appreciate their help.
- Tell children where to go next and what to do when they get there.
- Make sure the area children are moving to is staffed and ready for children.
- Keep the length of time children have to wait or stand in line as short as possible. The best way to get stragglers moving is to start the next activity.
- Avoid overcrowding in one small place. Bathrooms and coat hook areas become congested. Dismiss children who got themselves ready quickly rather than making them wait.
- Keep in mind that one staff member will have to stay in the area children are leaving until the last child is ready to move out.

Consistent routines ensure smooth transitions between activities. Consistent routines also help children go from activity to activity with a greater sense of independence and purpose.

Successful transitions occur when providers go around the room and make a quiet announcement to individual children.

Alternatively, you might want to have a special signal that lets children know a change is about to happen. Your signal might be:

- A song or chant, a guitar softly strumming.
- The lead provider sitting down in the group area, indicating group time is about to begin.
- A small bell ringing once.
- The provider's hand raised with two fingers extended.
- A necklace hanging on the wall, indicating there is room for another child in the art room, block corner, or bathroom.
- A special sign you hang on the wall, indicating the outside play area is now open.

Treat responding to the signal as a form of cooperation. Children responding to the signal quickly and independently demonstrate self-discipline.

Chapter 6. WAC 388-295-2010

Learning and Play Materials

Play is a child's work. Through play, children find out what they can do, who they are, and where they fit into their world. Through play, children have the chance to use their imagination and develop physical coordination. They learn new skills and sharpen their senses.

Providers can make a valuable contribution toward the quality of children's play with gentle guidance. A wide variety of age appropriate toys enhance learning. Toys and materials that meet children's social, emotional, physical, and intellectual needs open windows to their natural excitement for learning.

It is appropriate for children to draw their own pictures and create their own materials. Avoid coloring books and other duplicated pieces. Children working with professional drawings and perfectly cut out pieces are likely to start feeling that their work is inferior. When children do their own work they:

- *Improve their skills.*
- *Use their imaginations.*
- *Take pride in what they can create.*
- *Get ideas from each other about other things they might try.*

Much more varied and interesting products result, and children work at their creations with much more energy and enthusiasm.

Sources of Materials

Good providers are good scroungers. "Developmentally appropriate" does not mean that the material is new, commercial, or made specifically for children. Shop garage sales, make your own. For example, milk cartons you stuff with newspapers and cover with attractive contact paper make excellent building blocks. Let children help. For example, children can sew beanbags, make puppets, or paint backdrops for a role playing activity. Cardboard boxes, strapping tape, paint, and imagination can go a long way. Make use of kitchen items, recyclables, and Tupperware. Button collections can become an excellent sorting exercise or sewing activity. Assortments of nuts and bolts or jars and lids make wonderful matching and fine motor activities.

Other good sources of low-cost or free materials:

- Print shops, paper companies, and many other businesses often have scrap paper of all kinds, sizes, and colors. One of your parents can probably supply you with all the computer paper you want for children's art work.
- Cabinetry or kitchen remodeling shops will often let you have the pieces they cut out when they put sinks into countertops. Securely attach four legs, and you have an ideal child-sized table.
- Woodworking shops or lumberyards will often let you have scraps for free. These are excellent for carpentry or gluing projects. A parent volunteer with a table saw can turn 2x4 and 2x2 scraps into a building block set for the center.
- Picture framing shops have large scraps of sturdy, colorful matboard that are big enough for many of your display needs.

- Get a library card and use it regularly. Libraries and other associations often have book sales, if you want to build your own library.
- Generate a "wish list," and post it where the parents can see it. Ask a parent in your group who is a bargain hunter to shop garage sales. Businesses will donate or sell furnishings and equipment that is still in excellent condition at low prices.
- Companies periodically go out of business or sell off part of their inventory. School districts, private schools, and child care centers sometimes close or sell part of their inventory. These are excellent sources of used materials, including child-sized chairs, tables, and other furniture. Watch the classified adds, go to liquidation sales, and listen for announcements through your local provider association.

Browse through educational supply catalogs, even if you're not intending to buy. You can see what the manufacturers consider developmentally appropriate for different age groups. You might also get an idea about something you can very easily make yourself that will accomplish the same purpose.

Examples of Developmentally Appropriate Materials

Every center will meet children's needs using different materials and equipment. The lists that follow illustrate the range of materials necessary for different age groups. More detailed lists are available from many sources, including licensing orientation sessions. Look around your own center for materials that serve similar functions to the ones we list here. You will create and find other learning and play materials as you read, talk to other providers, and attend workshops.

The divisions by age and category of need in the following lists are only a rough guide. Younger and older children may enjoy the same materials, and a single material can satisfy multiple needs. Consider the interests and abilities of the children before deciding certain materials are appropriate.

Infants (1 to 12-month-olds)

Social, Emotional, and Creative Development

Possible materials include:

- Colorful, simple pictures hanging near a crib or low on the wall. Faces and simple designs are popular.
- Unbreakable mirrors, both small mobile ones and ones mounted on the wall close to the floor.
- Stuffed animals and dolls.
- Toy telephones.
- Short easels with markers or crayons on a short string.
- Favorite object; doll, stuffed animal, blanket, or pacifier.

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Intellectual, Language, and Sensory Development

Possible materials include:

- Objects with different textures such as fuzzy, bumpy, or smooth.
- Rattles with different sounds and shapes.
- Music tapes; classical, lullabies, or children's songs.
- Cloth or sturdy cardboard picture books with realistic drawings of photographs of familiar objects.
- Mobiles.
- Crib gyms (remove when children are about seven months old).
- Busy boxes.
- Nesting cups.
- Floating toys.
- Boxes, tubes, spoons, bowls, and buckets made of cardboard, sturdy plastic, wood, or cloth.

Large and Small Motor Development

Possible materials include:

- Squeeze toys.
- "Put and Take" any container with objects that children can drop or scoop something into and take out again.
- Large wooden cubes to push about and climb into.

- Push toys and pull toys.
- Supervised bucket swings.
- Small stairs, platforms, and ramps. Other furniture and equipment children can safely climb into, over, and under.

Toddlers (1 to 2-1/2-year-olds)

Social, Emotional, and Creative Development

Possible materials include:

- Dolls and stuffed animals.
- Props for dramatic play of home environment; stove, sink, baby carriage, vacuum, or shopping cart.
- Dress-up clothes.
- Hand and finger puppets.
- Plastic, realistic animals, people figures, cars, etc.
- Musical instruments; bells, triangles, rattles, or wood blocks.
- Art supplies; large crayons, washable felt pens, playdough, chalk board with chalk, paints with wide brushes or blunt ends, or low easels.

Intellectual, Language, and Sensory Development

Possible materials include:

- Simple lotto games and matching cards.
- Shape or color sorting toys.

- Simple puzzles with knobs (3-7 pieces).
- Music and story tapes.
- Sturdy, colorful, books with simple stories, few details, and familiar objects.
- Magnet boards with shapes.
- Smelling jars.

Large and Small Motor Development

Possible materials include:

- Large push toys and pull toys.
- Cars and riding vehicles with no pedals.
- Low slide, small steps and ramps, tunnels, supervised bucket swings, or balance beam.
- Low, soft climbing platforms.
- Large building blocks.
- Oversized balls.
- Oversized pegboards.
- Jars with lids to screw and unscrew.
- Large beads or spools for stringing on colorful shoelaces.
- Hammering and pounding toys.
- Stacking toys.
- Water table, sand table (or large dishpans on low table). Kitchen utensils for water or sand play, wisks, cups, funnels, spoons, or tongs.
- Simple housekeeping jobs; dusting, wiping tables, or cleaning windows.

Preschoolers (2-1/2 to 5-year-olds)

Social, Emotional, and Creative Development

Possible materials include:

- Playhouse furniture, pots, pans, or dishes. Occupation boxes; doctor, office, store, or scientist.
- Real housekeeping equipment; small brooms, dustpans, dusters, window washing supplies, sponges, mops, or dishwashing equipment.
- Self-care activities: dressing and tying frames, hair brushing and tooth brushing (individual sets), face washing, or shoe polishing.
- Puppets, simple puppet stage.
- Felt boards.
- All sorts of art materials, including paste, clay, chalk, crayons, charcoal, etc.
- Sandbox and water play.

Intellectual, Language, and Sensory Development

Possible materials include:

- Puzzles of all types (not too many pieces). Matching outlines to objects.
- Color and shape sorting.
- Classifying objects.
- Sequence and before-and-after cards.
- Pattern-making materials: pegs, colored shapes, or stringing beads.

- LOTS of books about the world, people, animals, different cultures, or fairy tales.
- Measuring, weighing.
- Math games; recognizing numerals, counting, or comparing quantities.
- Language games: vocabulary games, concept games, matching cards, rhyming games, sorting objects or pictures by sound, or memory games. Recognizing letters and their sounds, reading labels on objects in the room. Writing names.
- Science materials: scales, balances, magnets, air and water experiments, sea shells, or bones.
- Simple board games: lotto, dominos, picture bingo, or pickup sticks.

Large and Small Motor Development

Possible materials include:

- Balls and sporting equipment of all types.
- Jump ropes, hoola hoops, or stilts.
- Wheeled vehicles with pedals, scooters, wagons, or wheelbarrows.
- Climbing structures, ladders, cargo nets, poles, slides, or swings.
- Large block sets.
- Large set of small, interlocking blocks.
- Scooping, tweezing, pouring, stirring, opening and closing, and polishing activities.
- Cutting, pasting, painting, drawing, copying, tracing, writing letters and words.
- Simple sewing activities.
- Carpentry bench with real, child-sized tools hammer, vise, screwdriver, or saw.
- Cooking projects.
- Gardening projects.
- Musical instruments.

School-Age Children (5 to 12-year-olds)

Social, Emotional, and Creative Development

Possible materials include:

- Dress-up clothes and lots of dramatic, real props.
- Puppets, including shadow puppets and marionettes. (Children can act out their own scripts.)
- Cooperative games.
- Specialized dolls and stuffed animals.

Intellectual, Language, and Sensory Development

Possible materials include:

- Board games of all types, especially those requiring strategy and problem solving.
- Puzzles (50-1,000 pieces). Three dimensional puzzles.

- Audio-visual equipment, blank tapes for own recordings, tape player and earphones, records and tapes of different types of music.
- Science kits and tools, magnets, balances, microscopes, telescopes, prisms, weather kits, or simple chemistry experiments.
- Typewriter.
- Computers with educational games.
- Books. Common interests include fairy tales, myths, animals, contemporary stories about other children, poetry, nature, science, space, and magic.
- Making collections.
- Setting up aquariums and terrariums.

Large and Small Motor Development

Possible materials include:

- Outdoor and gym equipment of all types, especially organized group games.
- Wide variety of art materials.
- Model building.
- Large sets of small, interlocking blocks.
- More specialized tools for working on projects or skill development in carpentry, sewing, cooking, music.
- Games requiring speed, coordination, strategy, and extended concentration.

KEEPING THE ENVIRONMENT SAFE INVOLVES USING AND CHOOSING APPROPRIATE MATERIAL IN GOOD CONDITION.

Safety Issues

The materials in a child's environment should be safe. The younger the child, the more careful one must be. The U.S. Consumer Product Safety Commission lists the following potential dangers you should keep in mind when selecting materials:

- Sharp edges.
- Small parts.
- Loud noises.
- Cords or strings that can wrap around a child's neck.
- Sharp points.
- Toys used to shoot or throw objects.
- Equipment inappropriate for an age group. Pay attention to the manufacturer's age level recommendations.
- Electric or battery-operated toys. Make sure they are "UL Approved" and in good repair. Don't allow children to play with wires or batteries.
- Small toys.

Balloons are pretty and children love to play with them, but keep them away from young children. Balloons are inappropriate for infants and toddlers. Uninflated balloons or pieces

of balloons can easily get stuck in a child's throat, suffocating them. Balloons are one of the leading causes of accidental death in young children.

Keeping the environment safe involves using and choosing appropriate material in good condition. For example:

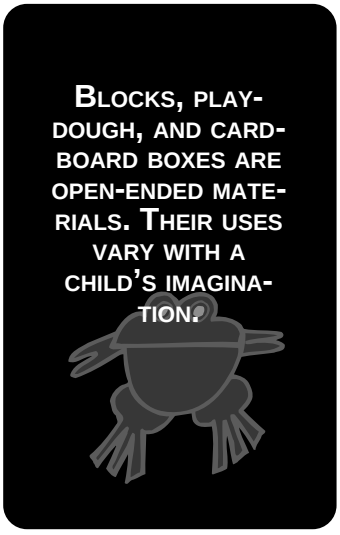
- Allow children to use only equipment designed for their size, age, and ability level.
- Read and follow all warning labels that come with equipment.
- Use equipment in safe places. For example, you should not place a balance beam close to shelves or tables which children might fall against.
- Teach children how to use equipment safely and supervise children's play carefully.
- Check equipment frequently for damage. Items quickly become unsafe.
- Remove damaged equipment immediately. Throw out unrepairable equipment.
- Make sure children use safety equipment such as helmets, knee pads, or goggles when appropriate.

Quantity of Materials

Having a sufficient quantity of materials does not mean having multiple sets of everything. In any quality group setting, children will select their own activities. Having only one of most things in the environment makes those things more special. Children will treat them with more respect. Also, learning how to share and how to wait one's turn are valuable social lessons.

Provide a variety of activities and materials. Having enough materials means:

- All children are busy with something interesting.
- Children have a variety of choices available in each category of developmental needs (see Chapter 5).



BLOCKS, PLAYDOUGH, AND CARDBOARD BOXES ARE OPEN-ENDED MATERIALS. THEIR USES VARY WITH A CHILD'S IMAGINATION.

Multiple Purposes Served by a Single Material or Activity

A single material with many uses meets different developmental needs and interests. Look for materials that are open-ended, meaning there is more than one way to use them. Blocks, playdough, and cardboard boxes are open-ended materials. Their uses vary with a child's imagination.

Likewise, a good activity is one that can meet a variety of needs at the same time. For example, staff might decide to suggest children make food collages after they discuss with them what foods help our bodies grow. This activity continues the

nutritional awareness lesson. It also involves the fine motor skills of cutting and gluing and the thinking skill of sorting foods into categories.

Part of your developmentally appropriate learning and play materials is children's clothing. You should do everything in your power to encourage parents to send children to the center in clothes, shoes, and coats that:

- *Children can pull down and pull up themselves when using the bathroom.*
- *Are not too tight or too floppy for children to move comfortably and without tripping.*
- *Are appropriate for the season and the day's weather forecast.*
- *Parents won't mind seeing come home dirty.*

Remind the parents also to check their children's extra clothes regularly to make sure all items are present, they are the right size, clean, and appropriate for the season.

Display of Materials

Giving children choices means storing materials so children can choose easily and wisely. There are advantages to storing materials on low, open shelves or in stacking bins, clear plastic tote boxes, ice cream cartons, rubber buckets, or other portable containers so that:

- Children can quickly and easily locate interesting activities.
- Children who aren't sure what they want to do can see the choices available.
- All the pieces to an activity stay together.
- Providers can quickly see if certain materials need repair or if parts are missing.

If multiple age groups occupy an area, store materials with sharp, small, or otherwise dangerous parts where younger children cannot reach them.

Having a well-thought out method of storing and displaying materials vastly increases the quality of the program you offer. It:

- Sets an example for children of care and respect for the materials.
- Results in fewer pieces being lost or broken.
- Cuts down on the time staff spend helping children find an activity or its missing pieces.
- Allows staff to group materials into areas, such as language, manipulatives, building, etc.
- Allows children to feel more independent and competent.

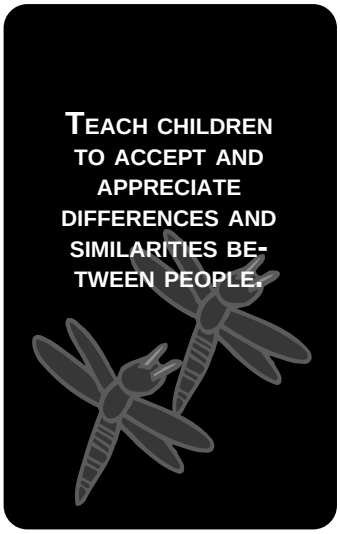
You may want to choose some container other than the original one to put out on the shelf. Open bins, baskets, or trays:

- *Display the materials more prominently.*
- *Are often more sturdy.*
- *Allow children to see the pieces they want rather than dumping the entire contents on the floor or table.*

Use an assortment of plastic and natural materials for containers to add variety and texture to your room. Garage sales are often a good source of containers.

You can put cards and small playing pieces in small baskets or plastic boxes to help keep them together. With older children, band materials together with rubber bands.

You might want to reinforce the corners of boardgame boxes with packing tape or contact paper to make them last longer. Clear contact paper is an excellent way to make paper, cardboard materials, and pictures last longer. They are also easier to clean.



If you want children to return things to a particular place, give them a visual clue where things belong. For example, you could:

- *Put a colored dot on a basket and the same colored dot on the shelf where it belongs.*
- *Cut a picture of the material out of a supply magazine and attach it with contact paper to the outside of the container. As a language experience, write the material's name.*
- *Draw the outline of a hammer on the pegboard showing where the hammer should hang.*

Providing a Culturally Relevant, Anti-Bias Program

A balanced, cultural program is important for all children. It is essential to set the stage through appropriate role modeling. Be aware of the subtle ways we define a person: sex, skin color, how they walk, their clothes, or the way they talk define

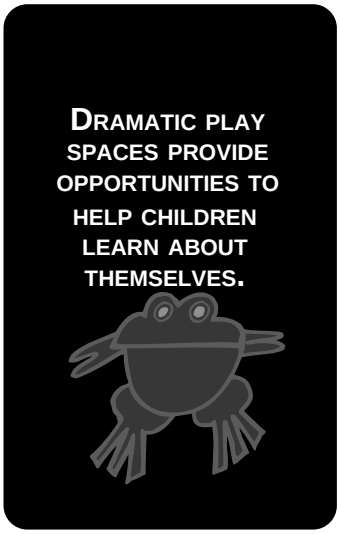
people. Children start developing their attitudes about others and themselves by age two. You can have a powerful positive influence on those attitudes.

Multicultural, nonstereotyping materials and activities:

- Support each child's sense of self and family.
- Teach children to accept and appreciate differences and similarities between people.
- Help children better understand the ways of others in their community and around the world.

Not all materials produced for children are appropriate by modern day standards. You should be especially careful with materials more than ten or fifteen years old. Be a selective consumer. Cut out negatively stereotyped images and stories whenever possible. For example, cover an Indian wearing a war bonnet on an alphabet collage with a different picture.

Look for stories that show children of color and women in urban and professional settings. Avoid Aboriginal images, such as Indians in war bonnets or black children in Little Black Sambo. There are many biographies showing people of color in leadership positions in American history. These are valuable as are stories that show daily living scenes from a positive viewpoint.



There are many types of learning materials that can make children more aware of other people and more comfortable with their own heritage:

- Books should accurately depict men, women, and children of different family types, races, cultures, income levels, and occupations living their daily lives and solving problems. (See the Resource section for some examples.) Older books sometimes contain blatant stereotyping.
- Puzzles, dolls, pictures, and toys representing various cultures and nontraditional male and female occupations.
- Music from various cultures.
- Pictures on display should also represent a diversity of cultures and gender roles. Pictures will mean more to children if you discuss them before putting them up.
- Dramatic play materials can encourage varieties of gender play and role playing of persons in other cultures or with special needs.
- Dolls in the center can be male and female, representing a diversity of the races, cultures, and lifestyles.
- Opportunities exist for children to experience other languages in spoken, song, or written form. Children can learn key words in other languages, including Braille and sign language.

- Offer popular foods of different cultures for snack, lunch, and special celebrations.
- Change the sex of the characters in songs like The People on the Bus or books like Three Billy Goats Gruff.

See the Resource section of this guidebook for possible sources of information and materials.

There are two common mistakes well-meaning providers make in responding to the need for cultural relevancy:

(1) The tourist orientation, showing different peoples only in exotic or stereotyped settings. It is important children see the many things they have in common with people around the world, and in their own neighborhood.

(2) Tokenism, having just one or two items representing a cultural group or a special population. Your program should invite an awareness of other groups through representing them regularly and respectfully.

The dramatic play area is a particularly good place for children to act out their developing awareness of the people around them. To do so, however, they need more than a pretend kitchen environment. Children need the tools, clothes, and spaces. This will allow for experimenting with living and working experiences both inside and outside the home. Children delight not only in dress-up clothes but with puppets for acting out dramatic scenes. Dramatic play spaces provide opportunities to:

- Overcome sexual stereotypes.
- Let children experiment with life in different cultures.
- Help children better understand people with special needs.
- Help children learn about themselves.

The art area also allows children to extend their new-found understandings. Include tan, brown, and black in the paints, crayons, paper, collage materials, and playdough you make available. Use positive and open language when referring to different colors. For example, you can describe the black in a child's drawing as bold, strong, or shiny, rather than calling it dark.

Of course, the greatest influence on children's developing perceptions of themselves and others is the model adults around them provide. All staff members should be sensitive to their own tendency toward stereotyped responses. Be aware when you are more concerned about a girl's rough house play than a boy's, or expecting certain behaviors from children because of the way they dress, look, or speak.

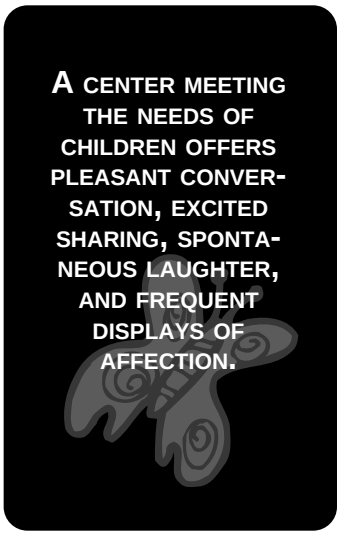
Chapter 7. WAC 388-295-2030

Staff-Child Interactions

Staff-child interactions are the heart of your program. Providing a range of activities and materials is only the first step. The quality of your activities and routines is only as good as the quality of the relationships between staff and children. Observe your program in action, and ask yourself these questions:

- What is the tone of staff communications? Do staff listen and respond to all children with respect?
- How much are children moving around and doing things? How much are children listening to providers or waiting for a turn? Moving and doing are best.
- How often do staff let children choose?
- Does the staff model the behavior they expect of the children?
- How do staff handle minor behavior problems?
- How do staff handle major behavior problems?
- Do providers respect children's different ways of approaching a task? Do providers encourage children to talk about what they are doing?
- Does the staff encourage children to treat each other with respect and to solve problems in a positive way?
- Do right answers come from both children and staff? How are mistakes handled?

The answers to these questions form the center's philosophy. A center meeting the needs of children offers pleasant conversation, excited sharing, spontaneous laughter, and frequent displays of affection.

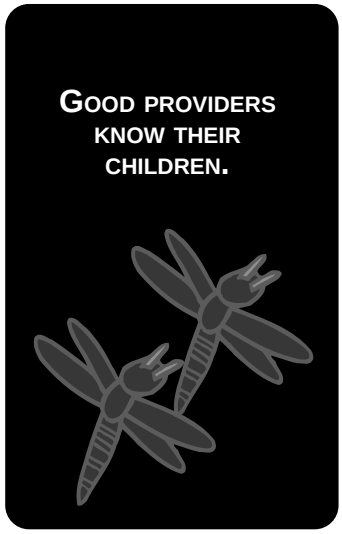


What It Means to be "Nurturing, Respectful, Supportive, and Responsive"

Your staff interacts with children, not just watches them. Providers can express their respect and affection by:

- Listening to what children have to say with attention and interest.
- Sitting low or kneeling.
- Making eye contact.
- Asking children for their opinions or suggestions.
- Giving children choices when possible.
- Observing children's play with interest and occasionally offering suggestions, but being careful not to control children's ideas.

- Speaking with children in a soft, friendly, and courteous manner. Doing so requires getting close rather than shouting across the room.
- Helping children who are restless, unhappy, tense, or bored to become involved.
- Accepting children's moods or their desire not to participate in an activity.
- Touching or holding children in a relaxed, comfortable, nonthreatening manner. Hugs and hand-holding should be used to show affection, not to corral children.
- Smiling and laughing easily and often.



Good providers give more attention to children's positive behaviors than to negative ones. They empower children by trusting them and by letting them do things for themselves. Children's ideas interest them. They are friendly and sympathetic without being smothering. They are interested and energetic participants in children's indoor and outdoor activities. They avoid always standing off to the side and simply watching.

Good providers know their children. They know that a particular infant signals she is getting tired by rubbing her ears. They know two-year-olds need to experiment with saying "No!" They understand that four-year-olds explore the meaning of friendship by alternately including and excluding playmates. They support a particular nine-year-old always giving orders to younger children in your center because of a bossy older brother at home.

Children need to know help is available from the staff if they need it. Children let staff know they need help not only with words but also by the way they stand, move, play, or act toward other children. Therefore, good providers watch and listen to children carefully. Good providers are also sensitive to signs of stress in children (see Chapter 8). They know the warning signs of physical or mental abuse (see Chapter 34).

Good providers are also there physically for children. The younger the child, the greater their need for physical contact. Hold infants frequently. Talk to them in a warm and soothing fashion. Give them lots of individual attention from a consistent caregiver. Toddlers often need a hand to hold, a lap to sit in, or a leg to hug. As children get older, they

need less physical contact, although hugs and warm touches are still very important especially when they are stressed or unhappy. For older children, offer a sense of personal intimacy and security. You do this through smiles, concentrated interest in the children's activity, and conversations that are friendly, relaxed, and encouraging.

In short, good providers care and are responsive!

Encouraging Self-Esteem, Independence, and Creativity

Self-Esteem

You help children develop self-esteem by:

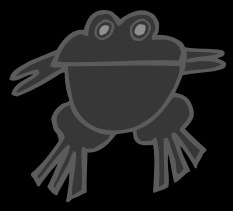
- Giving them responsibilities.
- Respecting their opinions.
- Arranging activities and your environment so children can succeed.
- Respecting children's cultural and family backgrounds.

It is important to help children notice what they can do and that everyone is good at different things. Projects should be open-ended so everyone can experience their own version of success. If children get stuck in one area of play, support them in trying new areas.

Foster children's self-esteem, ability to think, and willingness to stand up for themselves and others. Do this by allowing them to use their intelligence and power. They will then make a difference in their environment. Providers should encourage children to:

- Ask questions about any subject.
- Use their own ideas in problem solving.
- Talk openly with their providers.
- Make choices.
- Have some say in their daily life in the center.

FOSTER CHILDREN'S SELF-ESTEEM, ABILITY TO THINK, AND WILLINGNESS TO STAND UP FOR THEMSELVES AND OTHERS.



Independence

Children like to be able to do things for themselves rather than have someone do things for them. They love to wipe up their own spills and make their own snacks. They also like to draw and cut out their own designs. Solving their own problems offers independence. Children also like to have control over their own bodies. Teach them how to wash their own hands, wipe their own bottoms, blow their own noses, comb their own hair, put on their own coat change their own wet clothes, and tie their own shoes.

Giving children jobs and responsibilities increases their self-esteem and feeling of competence. Organize tasks so children can do jobs successfully. For example, if children are in charge of feeding the hamster, keep the cage down low and put the food in a small container with a scoop just big enough for getting the right amount.

Encouraging independence does not mean abandoning the child. Providers should carefully observe children as they do activities and be available if a child needs help.

Another important step toward independence is teaching children problem-solving skills. Children need help learning how to:

- Cooperate.
- Share.
- Compromise.
- Take turns.
- Let others know how they are feeling.
- Use words to solve problems.
- Express anger in acceptable ways.
- Keep their promises.
- Apologize.
- Walk away from a bad situation.
- Be a friend.

Creativity

Children in a supportive environment show a marvelous ability to do things in new and different ways. Each of us is creative in our own way. To encourage children's creativity:

- Ask open-ended questions.
- Encourage children to ask questions.
- Encourage children to guess, and value close answers or inventive ones as much as exact ones.
- Treat mistakes as valuable learning opportunities.
- Structure activities so there is more than one way to do things or more than one correct answer.
- Point out and appreciate how different children in the center come up with different solutions to the same problems.
- Don't rush to correct or expand everything children tell you or show you. Their excitement in what they have done or learned is more important than perfection.

If children ask questions and you don't know the answers, tell them you don't know, but you will find out. If children want you to show them how to do something you don't know, tell them you don't know. This openness helps children see that learning things is a lifelong process.

Likewise, freely admit the mistakes you make when you're working with children. Your willingness to do so is the best model for children that making mistakes is okay. Besides, they love seeing grownups be the ones who are wrong once in a while.

Treating All Children Equally

Treating children equally does not mean treating everyone the same. It means providers adjust their actions and messages to the individual abilities, needs, and backgrounds of children. It also means providers must not prejudge children's actions, interests, or abilities. Avoid value judgments based on sex, race, religion, culture, or handicap.

Help children see children with special needs as their equal, as differently able, not disabled. Ensuring equal dignity and respect for all children should be the goal. As with any child, too much help or praise is damaging, not helpful. Be available, but figure out ways for them to do things for themselves whenever possible.

As an adult role model, you are also responsible for showing children how they should treat each other. Children sometimes make embarrassing comments such as:

"Why does that man have squinty eyes?"

"She talks funny!"

"Look, her hair's all bouncy!"

"Why can't he walk?"

"See? She can't throw very good, 'cause she's a girl."

It is important that we not ignore the children's comments, change the subject, or answer indirectly. Children need information. They wonder how people get to be different. They wonder which things about themselves will always be the same and which things will change as they grow. They may be fearful of someone who looks or sounds strange to them.

Take advantage of opportunities to discuss with children how people are different from, yet the same as them. Answer questions that arise matter-of-factly, accurately, and with an age-appropriate level of detail. Discuss with children their feelings about different people and about themselves. Provide materials, read books, and organize activities that challenge children's stereotyped ideas. There are many books helping children deal with day to day problems. Stories about being left out, feeling different, and making friends can encourage discussions about how people solve their problems.

If you know a second language, use it frequently with children. Also encourage parents for whom English is a second language to use both languages at home. Reassure them that their child will benefit from using two languages. Exposing their child to the native language helps the child learn to speak two languages fluently.

REMIND CHILDREN ENGAGING IN PREJUDICED BEHAVIOR THAT ALL PEOPLE HAVE FEELINGS, ABILITIES, AND DIGNITY, JUST LIKE THEY DO.

Actively Fighting Prejudice

When you see prejudiced behavior you should act. Two examples are children teasing a child with Down's Syndrome or excluding a girl from a soccer game. Consider taking the following steps:

(1) First, check whether the incident is due to prejudice or to some other factor. Children get angry with each other, say unkind things, or don't want to include someone for reasons besides prejudice.

(2) Remind children engaging in prejudiced behavior that all people have feelings, abilities, and dignity, just like they do. Let them know how much their words and actions can hurt. Help them understand that prejudice influences their behavior.

(3) Discourage prejudice. Children have a right to choose who they want to play with. They don't have the right to make a person feel badly because a child:
- Is a different sex.
- Has a different skin color.
- Speaks differently.
- Uses a wheel chair.
- Dresses differently.

(4) Help children understand how someone discriminated against feels. Help them work through any self-doubts or anger that results. Help them think of effective ways to deal with similar treatment in the future.

(5) If necessary, involve the whole group in discussing how to treat people fairly, kindly, and respectfully. Use books, visitors, trips, role playing, etc., to help children better understand people different from themselves.

(6) If children split into small groups for certain activities, you may not always want to let them choose whom they are paired with. If they spend time with children they wouldn't normally choose, they can learn to appreciate their strengths, weaknesses, and humanity.

THE MORE YOU AVOID PROBLEMS BEFORE THEY HAPPEN, THE MORE CHILDREN AND STAFF CAN RELAX AND ENJOY EACH OTHER.

Chapter 8. WAC 388-295-2040

Behavior Management and Discipline

Being Prepared

Scale the children's environment to their size and thoughtfully arrange it with their needs and safety in mind. Children then develop independence. Staff and children benefit from a more relaxed, tension-free, and comfortable place.

Thoughtful planning will also prevent many discipline problems. Consider the following problems and solutions:

- Problem: Children running indoors. Solution: Arrange the furniture so there are no long, inviting "freeways" down which to race.
- Problem: Collisions in hallways. Solution: Put arrows or footprints on the floor indicating which wall to stay next to when walking in one direction or the other. Or you could dismiss children one at a time rather than all at once.
- Problem: Children nagging staff to get things for them. Solution: Set up well-organized supply shelves where children can get items they need for themselves.
- Problem: Children act up when standing in line or moving to a new activity area. Solution: Reduce the time children stand in line. Make sure a staff member is at the next location before the first child arrives.
- Problem: Children are fussy during morning circle. Solution: Rethink group time. Is it too long? Are there sufficient active as well as passive activities? Are certain activities boring? Would they pay more attention at some other time of day or in smaller groups?

In short, it may not be the children who are causing the problem. It may be the way you arranged furniture or scheduled the day's activities. It's surprising how many times there is a simple solution to what seems an unsolvable problem. The more you avoid problems before they happen, the more children and staff can relax and enjoy each other.

Developmentally Appropriate Expectations

Providers should not expect children to do things they are not developmentally ready for. Nor should providers scold children for behaviors that are normal for their age. Doing so forces children to fail, to feel badly about themselves, and to feel anger toward the provider. Inappropriate expectations also make managing a group considerably more difficult.

Following are some examples of behaviors providers can expect to see in children of different ages. Remember, children are usually just doing what comes naturally.

Infants (1 to 12-month-olds) tend to:

- Communicate their needs through crying.
- Drop things, often on purpose! Then they expect you to pick it up and give it to them again.
- Be messy. It is inappropriate to expect them to pick up after themselves or feed themselves neatly.
- Request that you pick them up and hold them a lot.
- Put everything within reach in their mouth and bite!
- Practice new skills and repeat new experiences with enthusiasm and perseverance. This may be inconvenient for you or dangerous for them. Thus, when they learn to bang things together, they bang everything! When they learn to crawl, they crawl everywhere!
- Ignore oral requests to stop what they are doing. It is inappropriate to discipline or scold an infant for unacceptable behavior.

Toddlers (1 to 2 1/2-year-olds) tend to:

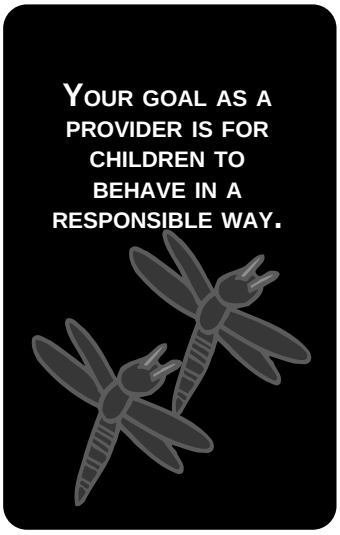
- Endlessly ask "Why?"
- Repeat the same activity many times.
- Say "No!" They say it often!
- Have a short memory for rules or details, requiring frequent reminders.
- Want to do things for themselves, even when they don't have the skills to do so successfully. This frustrates them.
- Get upset by disrupted routines.
- Grab things from another child if they want it.
- Test their physical limits by climbing, running, and pulling themselves up on things, sometimes getting into predicaments.
- Be distracted easily.
- Solve disputes physically because they haven't fully mastered language.

Preschoolers (2-1/2 to 5-year-olds) tend to:

- Increasingly feel they're "all grown up" and know everything. They want to make their own choices and have control over their time, clothes, food, toys, and friends.
- Become social. They spend increasing time playing with each other, getting silly together, and looking to each other rather than adults for approval.
- Have volatile friendships. Two children will be best friends one minute and exclude each other from play or call each other names the next.
- Be sophisticated enough in their language use that they play with words. They mimick other people and experiment with bad language.
- Be curious about each others' bodies.
- Imitate violent, strong role models in their fantasy play.
- Have less need for precise routines or orderly procedures, especially as they turn four and five.
- Begin to develop a sense of personal and cultural identity.

School-Age (5 to 12-year-olds) tend to:

- Master skills.
- Be more strongly influenced by their peers than by adults.
- Take interest in their appearance and what other people think of them. Embarrass easily and are slow to admit that they don't know something.
- Prefer to spend most of their time with children the same gender as themselves. Often they express dislike for the opposite sex.



Positive Discipline

Your goal as a provider is for children to behave in a responsible way. Sooner or later, the discipline you desire must come from within the children, not from you. Discipline and disciple come from the same root word, meaning "to teach." Positive discipline techniques don't just take care of particular problems effectively. They lead to fewer problems in the future and add to the warmth of the environment for the total group.

A trained staff uses a variety of developmentally appropriate management techniques to relate to children in positive, warm, and relaxed ways. The goals of positive discipline are to help children:

- Learn to make good choices.
- Learn problem solving skills.
- Learn basic human values of respect, trust, responsibility, honesty, and caring for others.

Following is a sample of practices consistent with these goals.

Have a Clear Set of Ground Rules and Routines

Children know what to expect when familiar routines and a clear set of ground rules exist. By anticipating problems and setting rules to avoid them, staff cut down on the need for "behavior management." With clear ground rules and familiar routines, children are able to experience a greater sense of independence and competence. They know where the limits are.

Staff should discuss with children the reasons for the rules. They should involve the children in the process of deciding what rules are necessary for the group. Children will be more cooperative when they realize staff don't make up rules and change them on a whim.

Part of having a clear set of rules is making sure everyone on staff is interpreting the rules the same way. Nothing gets the children into limit-testing quicker than having one staff member telling them they must do something and another telling them they don't have to.

Best practice is for providers to follow the same rules they set for children. Children accept a rule of sitting on chairs, not on tables, when they see staff sitting on chairs. Using quiet voices encourages children use quiet voices.

Fair is fair. If staff want children to regard the rules of the center as important, they should pay attention to the rules themselves.

Behaviors you don't approve of may be happening or even encouraged in other parts of the child's world. You can still expect children to operate by your rules when they are in your center. You don't have control over children's other environments. You still need to be in control of your own.

Use Consistently Positive Communication

- Providers offer encouragement, not empty praise.
  For example: "I really like the way you remembered to clean up your place at the table today."
  Rather than: "What a good girl you were today!"
- Providers make their comments sincere and specific.
  For example: "I noticed you working very hard on your painting. The blue color you used is very bright!"
  Rather than: "What a beautiful picture? It's the most beautiful picture I've ever seen!"
- Providers offer information rather than just stating rules.
  Thus: "If you hang up your coat, people won't walk on it and get it all dirty."
  Rather than: "Hang up your coat!"
- Providers focus on the positive behavior they expect to see happen next rather than the negative behavior that just happened.
  For example: "Oh, I'm glad to see you're not busy right now. How would you like to help me set up snack?"
  Rather than: "Stop running around the room!"
- Providers focus on children's feelings and the actions that result, not on the children themselves.
  Thus: "What made you feel so angry with Patrick you felt like hitting him?

Rather than: "Don't hit. Bad boy!"

- Providers focus children's attention on a positive event to come rather than the present disagreeable task.
  For example: "As soon as you've got the blocks you were playing with picked up, you can join us outside."
  Rather than: "Hurry up and pick up those blocks!"
- Providers focus on positive behaviors in the group rather than negative ones.
  Thus: "Almost everyone remembered to push in their chair today!"
  Rather than: "Some people are still forgetting to push in their chairs!"
- When there is damage to program materials or equipment, providers focus on how it affects the group rather than look for the culprit.
  For example: "Oh dear. One of the snack mats has been torn. That's sad. Now only three people will be able to sit at the snack table instead of four."
  Rather than: "Okay, who tore up the snack mat?"
- Providers tell children exactly what they expect and express confidence that children will comply.
  Thus: "Walk through the living room carefully because the other children don't like to be bumped. We will go outside in 30 minutes, then you can run and jump."
  Rather than: "You are so clumsy! Try to be more careful walking across the room."
- When children are upset, providers respond to the feelings underlying children's threats and not to the threats themselves.
  For example: (Child) "If he doesn't give my picture back right now I'm going to smash him!"
  (Teacher) "You're feeling so mad at him for taking your picture you feel like hurting him."
  Rather than: "Don't you DARE hit him!"

The most powerful tool you have at your disposal is the power of suggestion. Children will only be as good as you lead them to believe they are. Children will behave responsibly if you trust them to be responsible. Apologize when you lose your temper, falsely accuse a child, or make a promise you forget to keep. You will be providing a good model for how people should treat each other. It doesn't hurt to let children know you're human.

Give Children Choices

Part of respecting children is giving them choices whenever possible. If providers decide to redirect a child, they need to know what is unacceptable about the child's present behavior. They should also clearly communicate acceptable alternative behaviors.

Children find it much easier to make choices than to follow orders. In deciding what a child's choices are, providers should try to give the child the maximum choice given the situation. If children are to put on their shoes, providers can offer the child a choice. They could say, for example:

"Do you want to sit in a chair to put your shoes on, or on the floor?," or

"Do you want to put your shoes on all by yourself," or "Would you like me to help you?," or

"Do you want to put on your left shoe first, or your right shoe?"

Any one of these sounds better to the child and is more likely to get a positive response than "Put your shoes on now!"

CHILDREN FIND IT MUCH EASIER TO MAKE CHOICES THAN TO FOLLOW ORDERS.

People often give children choices they don't intend. For example, providers may say "Wouldn't you like to sit down and finish your lunch now?" when they have no intention of letting the child say "No!" A more honest communication would perhaps be:

"You may sit down quietly and finish your lunch. Or, you may sit over there and finish your lunch when the other children are outside."

Other times providers offer choices they don't intend to follow through on. One example is: "If you throw that rock you're going to stay inside for a week!" Other times choices are nothing more than threats, as in "Sit down or you'll be sorry!" These are unacceptable ways to talk to children.

Settle Problems Quickly and Follow Through Completely

When children refuse to choose among the options available to them, make the choice for them. Spending a lot of time with a balking child just focuses a lot of attention on negative behaviors. The more children feel they can tie up staff in negotiations, the more limit-testing they will do. Some examples of how to bring a situation rapidly to a close:

"It looks like you can't decide whether you're going to put your shoe on or not. I can't spend any more time waiting for you to decide. You may sit over here out of our way while you're deciding what to do."

"Can you decide which books you're going to look at all by yourself, or do I need to help you? (No response.) Make a choice, or I'll have to decide for you. (No response.) I see you'll need some help this time. Take this book to your table."

Children will learn that stalling looses them their right to choose. Once children get used to choices, they usually decide they want to make their own choices without protest. By giving the child choices, staff show respect for the child's dignity and independence.

Seeing a problem through to completion requires structuring the situation so the child cooperates before going on to other activities. For example, if a child needs to pick up toys, staff need to make sure the child doesn't do anything else until the task is complete. If the child tries to join some friends in their activity, a staff member can go over and say:

"I'm sorry. Ginny is not ready to play with you yet. She still has something she needs to put away!"

Staff should begin something only when they are prepared to finish. Staff must make sure they have the time, energy, and resources to see a problem through to its conclusion. "Seeing it through" means making sure the limits or options you present actually go into effect.

It is better to ignore a behavior this time than to force a confrontation and then back off. Recurrent problems offer plenty of future opportunities to deal with them!

Logical and Natural Consequences

"Natural consequences" are the results that follow certain behaviors. Thus, if children walk through a puddle in their tennis shoes, they have wet feet.

Logical consequences are reasonable results. One rule may be that children with wet feet come indoors to stay until their shoes and socks are dry.

Logical and natural consequences have the advantage of gaining a child's cooperation. A good rule of thumb is: If you want children to do something, make sure they are the ones who learn from their behavior.

For example: "Oh, I see you waited too long before going to the bathroom. I'll get you your dry clothes and you can change in the bathroom."

Rather than: "I wish you would stop wetting yourself. I'm getting tired of changing you all the time!"

Logical consequences are "logical" in the sense they are:

(1) Related to the broken rule.
(2) Respectful of the child.
(3) Reasonable, based on appropriate expectations for that child.

Thus, time outs or bribes are not logical consequences. They are unrelated to the broken rule. Making children clean up the entire lunch area because they left a mess under their table is not a logical consequence, because the consequence is greater than the unacceptable behavior.

Effective consequences require empathy. In fact, staff can openly sympathize with the child's situation.

Thus: "Yes, I know how much you enjoy your art time. I'm sorry you're missing it. You decided to scatter these toys all over the room and it takes a long time to get them all back where they belong."

Rather than: "Oh, okay, I'll finish picking these things up. You can go to art now!" It's not being cruel to the child. It's reality. Children who you constantly rescue from the consequences of their actions do not have the opportunity to become independent and self-sufficient.

Rewards, Tokens, and Stickers

"If you do a good job of cleaning up, I'll give you a sticker. When you get five stickers, you'll be able to choose a prize."

"If I have to remind you of one of our rules, I'll remove one of your cards from the chart. If I have to remind you a second time, you will lose one of your privileges (punishment). If I don't have to remove any cards, you'll get a token (reward)."

Behavior modification techniques are tempting to use, because they are so effective when used correctly, at least initially. Children will work for the rewards, and they receive physical evidence of their good or poor behavior.

Behavior modification techniques do not emphasize the social and interpersonal reasons for cooperating. Token systems are easy to carry out. Providers often do not fully understand or apply them properly when they are not thoroughly trained in the technique. A reward system often requires a more structured environment than is generally appropriate in a child care setting. Reward systems require that you not consider meals and outdoor play "privileges." They are part of required services.

You should discuss a structured reward system to handle a particular behavior problem with the child's parents before using it. Consult with a professional to help you implement the program properly.

Cooperating with these kinds of interventions can be appropriate.

Removing Children From the Group: Proper Use of "Time Out"

Time-out helps children cool off. Children sometimes need a quiet place for a few moments to calm down. Then they can rejoin the group when they feel they're ready. Sometimes they need a more structured time-out. They go to a particular place where there are no activities to do and stay there until given permission to get up.

Some providers over-rely on time-out. Leading educators are beginning to discourage its widespread use. Some favor a substitute "sit and watch" approach which also works for children who do not want to join a group activity.

Children should stay in time-out no more than one minute for each year of their age, up to five minutes. That is long enough for them to calm down and think about the problem. Time-outs are inappropriate for children under age two. A brief reminder of the rule and redirection are usually sufficient.

Having a child sit down for a while is NOT a substitute for problem-solving. It is essential that you return to the child and discuss the problem and what the child can do differently next time.

Stay flexible. Don't get into a power struggle or try to get a child to listen to what YOU have to say. If the child appears unwilling to discuss the problem, accept that. Walk off and leave the child sitting, perhaps saying: "I can see you're not ready to deal with this yet. I have other things to do. I'll come back in a little while and see if you're ready to talk to me."

Positive Steps in Conflict Resolution

Following is a suggested sequence for responding to situations so you can handle them in the most positive way possible:

Anticipate

The best way to handle a crisis is not to have one in the first place. All methods we discuss so far encourage a cooperative, respectful environment in which discipline problems should seldom arise.

Some children are less able to control their anger and frustration than others. You need to know what most likely aggravates a particular child and their response. With this knowledge, you can anticipate when children are getting into situations in which they are likely to respond aggressively. You can take steps to:

- Alter the situation.
- Redirect the participants.
- Become actively involved in the situation yourself, modelling social cooperation and problem solving. Recognize and respect all participants' feelings before it occurs.

Understand

An important part of preventing aggression and handling it when it occurs is knowing the source of the individual child's turmoil. Talk to the child's parents when you are unsure why a child is lashing out. The aggression may be due to:

- A normal developmental stage. For example, toddlers will often respond instinctively by biting or pushing when other children are in their way.
- Frustration over some activity that is too difficult or some social problem which they cannot resolve.

- Anger at the provider or the other children.
- Sickness, hunger, or lack of sleep.
- Over-stimulation.
- Stress at home or at child care.
- Too many recent changes in a child's life, such as moving or a new baby in the family.
- Defense. For example, children may be picking on, teasing, or ignoring the child.
- Lack of communication or coping skills.
- Seeking the approval or attention of their peers.

Help children use acceptable ways to express their feelings. Exercise your judgment. For example, you can:

- Find a friend for children who their peers exclude. Role play during group times how it feels to exclude someone. Talk about ways to solve problems.
- Guide children who are sick or overstimulated to calmer, more solitary activities. Offer them a place to lie down and relax.
- Stop toddlers when they hurt someone and make them aware of the injury. While tending to the injured child, also help toddlers realize that their actions really do affect their peers. With older children, you may want to put them in charge of helping a child they have injured. They could take the child inside to have a scrape cleaned and bandaged.
- Offer children help or redirect them to another activity if the present activity is too stressful or frustrating.
- Provide a punching bag for an older child with an overwhelming need to hit. Give a teething ring to a younger child who has to bite something.

It is important to talk with parents about major or repeated incidents. Let the parents know what behaviors you are seeing at the center. Put the problem behavior in perspective. Relay some positive things about the child to the parents. Ask if they are seeing similar changes at home. Together, discuss possible ways of dealing with the problem.

In the days that follow, keep in contact with the parents, sharing with each other any changes you have seen. Keep those lines of communication open! A cooperative relationship with a child's family can help solve small problems before they become major ones.

Defuse

If a child is getting out of control, get the most competent staff member available to come handle the crisis. That person can take steps to calm the child's rising fury.

Some general "crisis management" tips:

- Use a calm, soothing voice. Ask children to explain what happened that they think is unfair.
- Give children physical space. Don't try to grab or chase them. Children may threaten to hit or to run away, but they seldom will unless you respond physically to the threat.
- Allow children to vent their fury verbally. Show that you understand their point of view by repeating the message back to them. Let them know that you don't have a problem with the way they are feeling, only with the way they are acting.
- Discuss options. Try to change the tone of the confrontation from one of anger or power to mutual problem solving.
- In some cases, it helps to discuss the problem a child is having with the larger group. Ask the child's permission for the child's peers to think of ways they could help. In other cases, it is more respectful and less embarrassing for the child if you keep the matter private, just between you and the child.

Deflect

If a child is physically threatening you, other children, or the environment, you can:

- Remove yourself and other children from harm.
- Stand between children and their intended target.
- Block blows with your arms. Often after a single blow the danger is past.
- Walk away from the confrontation. It is often better to let tempers cool than to insist on getting your way right this minute.

Restrain

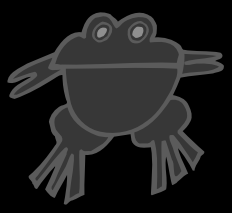
You should try all other ways of minimizing the present danger before you consider using limited physical restraint. Normally, restraining children involves:

- Wrapping your arms lightly but firmly around their chest from behind. You may have to pin their arms to their side. Normally crossing their arms in front of them about waist high is more comfortable and soothing.
- With younger children, you might put them in your lap facing away from you so they cannot bite, punch, or kick. Watch out for head butts, though. You'll probably be sitting on the floor or in a chair. You might also need to wrap one arm around their legs, if necessary, to prevent kicking.

Use of rope, tape, or other materials to bind children is strictly forbidden. Physically restraining children is not acceptable as a routine form of discipline. Use physical restraints only when children are endangering themselves, others around them, or doing major damage to the center. Even then, there is probably someone at the center who can remove the danger in a more positive manner. The person on staff trained to use limited physical response knows there are better ways to handle the situation.

You may need to move the child you are restraining to another room. Make sure

AVOID LECTURING. WAIT FOR THEM TO TELL YOU THEY ARE READY TO TALK.



you adequately staff the rest of the group. If necessary, move the other children to a new location. It is important not to let trouble with one child disrupt the whole group. When you can safely stop restraining the child, do so. Remain with the child.

Resolve

Avoid lecturing. Wait for them to tell you they are ready to talk. When you both are calm enough to do so, return to discussing the initial problem. Bring the problem to a conclusion. Allow children to rejoin the group as soon as possible.

Let the child and the rest of the group know that everything is okay by a smile or a pat on the back. School-age children look for some physical expression that the problem is past.

Knowing the Limits of Your Expertise

Sometimes you won't know how to help a child learn to behave acceptably. Some problems require professional diagnosis or intervention. Seeking outside help with a problem is a sign of your professionalism. You recognize a problem that requires expertise beyond your training.

Early intervention is better because:

- It prevents labeling children as "bad" or a "trouble-maker."
- You can discover the source of the problems. For example, the child may have allergies or may not be able to hear well.
- Staff are more likely still to have the energy, patience, and personal rapport necessary to continue working with a child.
- A child is more likely to recover when they continue to participate in your center.
- Sometimes a child's problem is part of a larger family problem requiring professional solutions.

There is growing acceptance in our society for people seeking professional advice. Find out what resources or consultants are available in your community. You can then offer positive options to parents when you discuss your concerns.

Children and Stress

Children under stress may become more aggressive, clingy, sad, or in need of constant reassurance. They may regress in their toilet training or show other immature behaviors. Children might also have increased activity levels or shorter attention spans.

There are steps providers can take to help reduce children's levels of stress:

- Have a predictable daily schedule, so children know what to expect for the day.
- Establish rules that are simple and clear.
- Have as few changes in the persons providing care during the day as possible.

- Have quiet places where children can get away and be by themselves for a while if they wish. Children under stress often need more physical space to themselves and smaller groups of children around them.
- Include in the daily routines time for small group activities, one-on-one time with an adult, and a balance between active and quiet times.
- Give children time to complete activities and tasks at their own pace. Respect their desire to direct their own activity.
- Let children know that you are in charge. Handle limit testing fairly and firmly.
- Provide a soothing activity such as water play.

If you see children getting into stressful situations, help redirect them to less stressful activities. Take a few moments to cuddle and sooth them. Gently ask them about their feelings. Be on the lookout for signs of physical or mental abuse (see Chapter 34).

Inappropriate Forms of Discipline

Distinguish discipline from punishment. Discipline has as its goal educating and redirecting children. It emphasizes cooperation. Punishment has as its goal hurting, shaming, or scaring children. Punishment is an inappropriate form of discipline, and has no place in a child care center.

There are times when you will be genuinely angry at a child. Whenever you express your anger at what children do, it is important that you:

- Make it clear you are angry at the child's behavior, not the child as a person.
- Not let your anger be an excuse to be out of control, abusing the child either physically or verbally.
- Take a moment later, when you've calmed down, to let the child know you're sorry you got angry and that you're ready to start fresh.

Shaming

Shaming a child is never appropriate. Examples of shaming include:

- Calling a child names.
- Shouting at a child.
- Ridiculing a child in front of a group.
- Allowing the group to make fun of a child.
- Putting an older child in a playpen, crib, or highchair.
- Making a child wear a dunce cap.
- Making a child put his face against the wall.

Shaming is a source of stress and anxiety for children. It makes them feel badly about themselves, angry at the provider, or afraid of being punished again. As a response to shaming, children will likely:

- Become submissive and withdrawn.
- Look for ways to hurt the provider, the environment, or other children.
- Become sneaky and dishonest.

Corporal Punishment

The department and state law strictly forbid all forms of corporal punishment at the center. Corporal punishment includes but is not limited to:

- Striking, kicking, or poking children.
- Shaking, pulling, or pushing children.
- Grabbing children by the hair, ears, neck, or head.
- Pinning children to the floor or against a wall.
- Sitting on children.
- Squeezing children across the throat or lower abdomen, making it difficult for them to breath.
- Forcing children to eat an unpleasant substance like soap, vinegar, or cayenne pepper.
- Allowing a child to do any of the above to another child.

These actions are extremely dangerous and are never appropriate. Grabbing children by the hand or arm can result in broken bones or a dislocated elbow or shoulder.

Parents may not physically punish their children at the center. Clearly describe this policy to the parents in the parent information materials. Calmly but firmly intervene if a parent begins physically disciplining their child while at the center. The law protects children from physical and emotional abuse.

Parents and staff can benefit from your knowledge of positive discipline techniques and resources in the community to help with discipline problems. Parents would probably appreciate at least one parent meeting a year dealing with age-appropriate behavior expectations and discipline. You can also share your philosophy and ideas on an ongoing basis, through daily contacts, the parent newsletter, and parent-provider conferences.

Be flexible and sensitive to the parents' feelings and desires, however. Parents can only benefit from your expertise to the extent they are looking for alternatives.

Reasons to Avoid Using Physical Restraint

Physically restraining a child stops a dangerous situation so that problem solving can begin again. Physical solutions are likely to backfire for several reasons:

(1) Desperation. This can occur when you are running out of ideas, and the child feels cornered.

(2) Anger. You and the child do not feel like treating each other in a respectful and caring manner at the moment.

(3) Adrenalin. Both you and the child are experiencing a chemical rush. Actions will likely be more violent than you both intend.

(4) Precedent. Any use of physical force serves as an inappropriate problem solving model to children. If we expect children to find nonphysical ways to solve their problems, we must do so too.
(5) Physical limitations. Some children are too strong for physical restraint.
(6) Liability. Someone seeing a provider using physical discipline techniques may consider them suspicious or unjustified and call CPS. Centers are potentially liable for any injuries to children resulting from staff actions.

Sometimes it's the staff member who needs (and wants) a "time-out!" If things are getting tense, it might be time for someone else to step in with a fresh approach.

It's difficult to respond reasonably to a balking child when you're under stress. Staff may think it is better to tough it out rather than admit weakness, but it is not. Encourage staff to let someone know when they think they're losing it. Usually someone else can take over for a while, perhaps the program supervisor. The staff member can then step out for a while and relax. Usually a short break is all they need.

Experts tell us that most cases of child abuse occur when people are under stress. If you want staff responding flexibly and respectfully to children's requests and needs, you need to establish procedures for staff to get help when they need it.

If you use limited physical restraint it must:

* Not intentionally cause pain.
* Not threaten to cause pain; for example, holding a child's arm behind the back.
* Be as brief as possible.

Describe in writing incidents when a staff person uses physical restraint, and put the report in the child's file. The report should include: 1) date and time, 2) what prompted the use of restraint, 3) who handled the incident, 4) method of the restraint they used and for how long, and 5) how you resolved the situation. If the incident was serious, discuss it with the child's parents. You may want to discuss it with your licensor.

The Center's Discipline Policy

The purpose of discipline is to help children learn basic human values, problem solving skills and to take responsibility for their own choices. Telling parents you will not spank their child is the easy part. Staff need clear guidelines on the center's discipline policy and training in positive discipline techniques. Orient the staff thoroughly. Give new staff members a chance to see how more experienced providers talk to the children and handle problems.

Have your program supervisor provide training in: 1) active listening, 2) helping children problem solve, and 3) using positive communications. Arrange for outside speakers. Give staff useful materials to read (such as this guidebook!). Encourage

Behavior Management Policy

This child care center uses ***indirect guidance*** techniques:

- We give previous warnings: “You have 5 more minutes to play before it’s time to clean up.”
- We give choices: “You may paint with the other children or you may read a book in quiet corner.”
- We have a regular routine: “We always wash our hands before lunch. After lunch is story time.”
- We avoid nagging: We tell the child what we expect just once, follow it by asking the child if he/ she remembers what we asked, and then offer to help the child do what was asked.
- We’re consistent: We do things the same way each day so the children know what to expect and learn to trust and feel safe in their environment.

We also use ***direct guidance*** techniques:

- We use the affirmative: “We use walking feet indoors” rather than “Don’t run!” or “Use your words to tell us you’re angry” rather than “Don’t hit!”
- We get the child’s attention by crouching down to his/her level, making eye contact, speaking quietly and asking the child to repeat the directions.
- We try very hard to be fair. We examine our expectations to make sure they are age-appropriate, and we don’t make rules just because an activity is too noisy or messy.
- We avoid arguments by following through with solutions that address the problem, but also offer the child a way to exit gracefully from the problem: “You can choose a quiet place to calm down or I can choose one for you.”

If a child is unable to demonstrate self-controlling behavior, a brief time-out results for the child to regain control. Time-out occurs only when other measures fail, and is used as an opportunity for the child to re-group, not as a punishment.

By law, and program philosophy and policy, the following forms of discipline are forbidden: hitting, spanking, shaking, scolding, shaming, isolating, labelling (“bad”, “naughty”, etc.) or any other negative reaction to the child’s behavior. All forms of corporal (physical) punishment are strictly forbidden.

Some negative behavior is best ignored since its goal is often to get attention. This technique is effective for some of the disruptive things children do and it minimizes mimicking activity by other children.

If a child is unable to gain control and requires more individual attention than can be given within child to staff ratios, we may need to contact a parent. A child requiring one-to-one attention may have to leave the center temporarily for safety’s sake. Repeated uncontrollable behavior can lead to discontinuation of child care services.

attendance at workshops. Probably no area of training will have a greater impact on the tone and quality of your program.

Tell your staff whom to go to for assistance if a discipline problem is beyond their control. For example, you probably want to tell your aides to get the lead provider if they are having trouble getting a child to cooperate. Lead providers, in turn, should be able to call upon either the program supervisor or the director.

The director and program supervisor should observe all staff regularly to make sure communications and problem solving are positive and nonthreatening. Offer suggestions for other ways a problem could have been handled if you think it is necessary.

Sometimes just handing over a problem to someone else solves the problem. The other staff person is not necessarily more competent than you. Sometimes children are ready to cooperate but don't feel they can give in to you without losing face.

Tell staff not to take it personally. They will probably have an opportunity to help another staff person with a problem before long.

Beware of lead providers regularly sending their behavior problems to the director's office:

- *Doing so sends children a message that the provider can't control them.*
- *Children often think the office is a fun place to be, or that being sent there makes them special.*
- *The provider needs to see how they might handle a similar situation themselves next time.*
- *The context in which the problem arose is an important part of solving the problem.*

If staff need help handling a problem, it's best to have the director come to the room to help, not send children to the director.

Chapter 9. WAC 388-295-2050 through 388-295-2060

Sleeping and Off-Site Considerations

Rest Periods and Nighttime Care

It can be a long day. Most children under five years old benefit from having a short period in the early afternoon when they relax. Often children don't realize how tired they are until they slow down for a few minutes. Having a scheduled rest time lets them find out.

Tell children and parents that sleep is optional. You may want to allow children to look at books or do a quiet activity like a puzzle on their mat. Allow children who have not fallen asleep in a half hour or forty-five minutes to get up and do quiet activities while the other children nap.

Nighttime care givers may break visual or auditory contact but not both with children for brief periods of time. It is not an acceptable practice to:

- Rely on an intercom to monitor a room.
- Listen for noises through an open door.
- Look through a window to the room where children are sleeping.
- Shut a child in a room and listen to them cry.

There are too many dangers which you cannot notice without regular staff present and alert. For example:

- There is not always noise when a child is in trouble or in need of assistance. For example, a child might be sleep walking or choking.
- Broken monitoring equipment. If you use such equipment, make sure it is working properly.
- Fire or other hazardous conditions can occur without anyone noticing until too late.

With heightened public concern about sexual abuse, staff watching over sleeping children should avoid even the appearance of improper behavior. For instance, if you decide to rub a child's back to help them relax, do so only for a brief time. Keep your hands clearly visible and away from private areas at all times. Avoid an adult alone with children for long periods of time. This increases the safety of children and protects the reputation of staff.

Off-Site Trips

Centers need to have signed, parental permission on file if they are going to take children someplace away from the center. This includes walks around the block and to the local park, as well as more elaborate field trips.

There are two schools of thought among center providers about field trips. Some treasure them as a learning experience for children. They regard trips as a chance for everyone to do and see something different. Others worry about the liability and the difficulty of arranging transportation. Field trips, neither required nor essential, are rewarding for you and the children. Centers do not need to ask for a new permission slip each time they plan an outing. Parents can sign a blanket authorization for their child to go on all trips the center organizes.

In any case, notify parents in advance of each individual trip. This allows them to:

- Send children appropriately dressed, and send a sack lunch, if necessary.
- Alter their drop off and pick up times, if necessary.
- Express any objections they might have to their child going on this particular outing.

Notification of possible spontaneous outings can be a general announcement on the bulletin board or in your newsletter covering an extended time period. For example, you might say:

"During the nice weather this month, we might decide to take a walk down to the park in the afternoon. If we do, we will return to the center by 4 p.m."

Plan ahead so the group returns to the center at a convenient time so parents can sign out their child at the end of the day.

Parents can let you know if they need their child at the center at a certain time. For example, they might have to catch a bus, pick up other children, or get to a doctor's appointment.

Centers must make proper arrangements for children who do not have permission to go on the trip.

Making Sure Field Trips Go Smoothly

- Make sure the place you want to visit knows you're coming, and that they are ready for you. Let them know the size and age range of your group.
- Double check such details as; parking locations, transit schedules, routes and stops, admission fees, and starting and ending times for scheduled events.
- Let children know ahead of time where they will be going. Discuss some of the things they might see.

Field Trip Notice

Group: _____ **Place:** _____

Date: _____ _____

Leave at: _____ **Return at:** _____

Note: _____

I give permission for my child to participate on the field trip:

Child Name	PARENT SIGNATURE	Child Name	PARENT SIGNATURE

- Let the parents know where you will be going, the day and time you'll be gone, and if they need to send a sack lunch or money.
- Post a sign-up sheet or distribute permission slips to get parent's written permission for their child to go on the trip. This is for centers without blanket authorizations.
- If you need parent drivers, have parents sign up, indicating the number of seat belts. All vehicles must be insured and well maintained.
- Decide how you will handle snack or lunch, if necessary.
- Prepare for the possibility of a long waiting period someplace with little to do. You might bring along art materials for children to draw what they are seeing.
- Plan follow up activities after the trip for children. They can discuss what they saw and learn more about things that interested them.

Teach Children How to Act on Trips

Know your children. Off site trips become easier after the children become comfortable with you and your rules. Children and adults will both enjoy themselves more if you've discussed the following ahead of time:

- Staying with the group. Have children hold hands with a partner.
- Proper behavior when traveling in someone's vehicle or in a public place.
- What to do if they get separated from the group.
- Using the bathroom when they have a chance.
- How to respond if a stranger calls out to them.

THE LAW ALSO REQUIRES PROVIDERS TO PLACE CHILDREN UNDER ONE YEAR OF AGE IN AN INDIVIDUAL SAFETY CAR SEAT.

Transportation (Center Owned or Operated Vehicles)

If the center owns or leases its own vehicle for field trips, the center must have liability coverage for commercial use. The driver must have a valid Washington State driver's license. Either the driver or one of the adult passengers must have current first aid and CPR certification.

Safe Operating Condition

You must maintain vehicles the center owns or operates in proper working order as defined by the State Patrol's Commercial Vehicle Inspection Office. You must ensure all equipment originally on the vehicle when it was manufactured is working. This will probably include:

- Brakes and emergency brakes.
- Headlights, brake lights, turn signals, and emergency flashers.
- Windshield wipers.
- Interior and exterior rear view mirrors.
- Spare tire, in good condition and properly inflated.

Maintain a regular maintenance schedule and check oil, radiator, transmission, and brake fluids before transporting children. You must properly inflate tires, with at least a quarter inch of usable tread remaining.

Recommended Safety Equipment

School buses must carry the following equipment to respond to emergencies:

- A fully stocked first aid kit.
- A fire extinguisher.
- Emergency flags or warning triangles.

DCCEL expects centers to have similar equipment in their vehicles. You may want to consider carrying the following items with you:

- A warm blanket.
- A working flashlight.
- Chains.
- A tool kit.

Seat Belts

State law requires that all persons in a moving motor vehicle other than a bus always wear a lap restraint. The law also requires providers to place children under two years of age in an individual safety car seat. Recent research suggests lap belts alone can result in severe abdominal or spinal injuries in a crash. Shoulder straps also present a problem for children, however, since they don't properly fit young bodies.

The best practice for transporting children is to use an approved car seat that fits them (which has its own upper body restraint). Use booster seats to help shoulder straps and lap belts fit properly. Children are also safer if they ride in the back seat. Each child must have an individual, separate seat belt. DO NOT double buckle.

You might want to suggest to parents that they use booster seats or car seats with their toddlers and younger preschoolers. Ask that they bring this equipment to the center on the day of a field trip.

Volunteer Drivers

WAC 388-295-2070 applies to vehicles the center owns or operates. Centers should have similar policies covering parent drivers and their vehicles as well. Your center is ultimately liable for the children's safety, even if they are in a volunteer driver's car.

When transportation requires multiple drivers, use a caravan or buddy system. That way no one is likely to get lost and assistance is readily available in case of accidents or break-downs. It's a good idea to have at least the last car in line carry a person with current first aid and CPR training and a first aid kit.

On the Day of the Trip

Put tags on all children giving the center's name, address, and phone number. You might use:

(1) Tags safely pinned in a way that won't poke children. (Do not write children's names, addresses, or home phone numbers on tags.)

(2) Stick-on labels.

(3) A center address stamp for children's wrists.

Some centers invest in a special center T-shirt with the center's name printed on it. Have children wear these on all trips away from the center. They help identify where children belong if they get lost, and:

- *They provide an easy visual check whether or not the group is staying together.*
- *They serve as free, mobile advertising for your center.*

Other safeguards to remember:

- Take a first aid kit, possibly in a backpack or other portable carrier.
- Have a map showing how to get to and from the destination.
- Bring children's emergency medical authorization cards. It is also a good idea to bring along general information like emergency phone numbers. This information should accompany children in whatever vehicle they travel.
- **Sign out children when you leave. Sign them back in when you return.**
- Write down children's names for each adult in charge of a group.
- Bring change for the pay phone.
- Be sure staff carry ID for emergencies.

Chapter 10. WAC 388-295-2080

Parent Communication

Parent communications are the lifeline of your program. Good communication means letting people know what they need to know when they need to know it. It means:

- Effectively describing your program to parents so they can decide whether to enroll their child.
- Getting from the parents the information you need so you can do a proper job of caring for their child.
- Keeping in daily contact with the parents. For example, making sure they know how their child got that goose-egg on her forehead, or just saying "Good morning!"
- Making sure parents pass important information on to you, such as, that their child is going home with a friend that day.
- Letting parents know how their child is doing. Little bits of information on a regular basis help make the parents feel more a part of their child's whole day. They love to hear about amusing incidents or new developmental milestones.

• Ensuring that parents know about center events, holiday closures, or center policies.
• Reassuring parents that, although you have their child with you many hours each day, you recognize the parents as the child's primary care givers. You want the child's time with you to meet the parents' wishes and expectations as much as possible.

Communication is not a one-way street. You want parents to share with you:
• How their child was feeling last night.
• Major changes in their family situation.
• Exciting or unexpected new things the child is doing at home.
• Concerns about the program or their child's care. You want the parents to talk with you. Complaints to other parents or silence don't help you give excellent service.

The next few sections discuss one way you might handle the enrollment of a new child in your program. This is a possible sequence for meeting DCCEL requirements for parent communication, not a required one. **The items we star indicate written policies you MUST share with parents by the time their child starts your program.**

First Contact with Parents

Most parents' first contact with your program will be a telephone call. Usually, they want to get some information about your program or to arrange a time to visit. If you are not free to answer their questions fully, you may want to ask them when you can call them back. You will probably want to get at least the parent's name, phone number, and the name and age of their child. Consider mailing them one of your brochures or parent information guides.

When parents schedule a visit, they should know whether to bring their child. Tell the parents your policy on their children joining center activities during the tour.

Prospective parents may drop in unannounced. You may be too busy to give them a complete orientation. Invite them to observe for a while. Ask them to schedule another visit for a full introduction to your program.

Before Enrolling a Child

Telling Prospective Parents About Your Program

Prospective parents want a chance to see the program in operation. They will ask questions and want a formal orientation to your program. If parents visit your program, you will probably share with them during the visit much of the important information about your program, such as:

* The philosophy of your center.
* The age groupings, child-staff ratios and physical layout of your center.
* Opening and closing times.
* Part-time or drop-in options.

* A typical schedule of activities for children the age of their child, including meals, naps, and outside times.
* Tuition and other fees.
* Meal and snack policies.
* Field trips.
* Religious activities in your program.
- Special "selling points" of your program.
- Controversial or sensitive aspects of your program. This may include discussions of bias or sexuality issues with children.
- That you are a licensed center, and what that means.
- How long your center has served the community.
- The background and experience of your staff.
- Parent participation in center activities.
- What openings you currently have or how long their child might be on a waiting list.

You will be giving the parents all the details to help them make an informed choice whether this program is right for their child.

YOU WILL BE GIVING THE PARENTS ALL THE DETAILS TO HELP THEM MAKE AN INFORMED CHOICE WHETHER THIS PROGRAM IS RIGHT FOR THEIR CHILD.

Parents of infants will be interested in:

- Meeting the staff person who will be the child's primary caregiver.
- A setting that is bright, cheerful, clean, secure, and separated from the areas for older children.
- Infant: staff ratio for their child.
- Feeding, diapering, and napping policies.
- How providers and parents pass information back and forth about the day's events or schedule.

Parents of toddlers will be interested in:

- Meeting the staff person who will be the child's primary provider.
- The indoor and outdoor equipment their child will use.
- The separation of the toddler and preschool programs.
- Toilet training and nap procedures.
- Behavioral expectations of their child.

Parents of preschoolers will be interested in:

- The range of activities the program offers for meeting the child's needs.
- Typical behavior management techniques.
- Indoor and outdoor facilities.
- Off-site trips.

Parents of school-age children will be interested in:

- Activities for their children.
- Outdoor play options or quiet places to do homework.
- How their child will get to and from school.
- Group size.

Parent's "Right to Know"

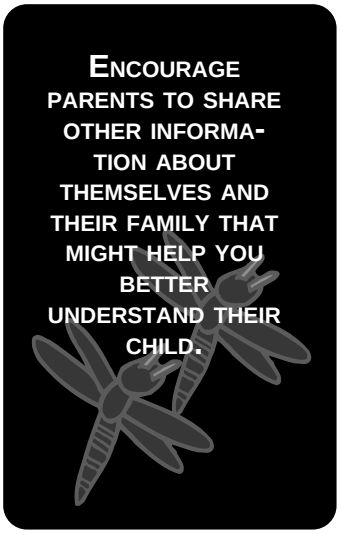
Valid complaints about your center are public information. DSHS must, if asked, give parents or other interested parties general information about:

- Results of health, fire, or licensor monitoring reviews or inspections.
- Complaints the department substantiated.

Information You Want from the Parents

You and the parents are trying to decide if your center is right for their child. To do this, you need to get parents to tell you things as well. For example, you may want them to describe their child to you:

- His or her history in group settings.
- General personality and activity level.
- Special interests, talents, or fears.
- Foods the child cannot eat and acceptable substitutes.
- Allergies, possible learning disabilities, or other special needs.
- Major life changes recently besides starting a new day care, that is! For example, did the family just move? Has there been a recent divorce or a new stepparent?



Encourage parents to share other information about themselves and their family that might help you better understand their child. For example, it would be useful to know:

- How do they discipline their child at home?
- Do they have strong opinions or values about childhood in general? How adults should treat children? How children should respond to adults?
- How would they describe their family? Are both parents at home? Does the child have brothers or sisters? If so, how many and what ages? Are there any extended family members at home?

Parents from some backgrounds or cultures may be uncomfortable sharing information about themselves and their family. Let them know why this information is useful to you. Don't pressure them if they appear unwilling to answer.

You want to know any special concerns or expectations parents have regarding child care. For example, they might be looking for a center where:

- There is some flexibility in what days and times their child can attend.
- An occasional late pick-up is okay.
- The inside and outside play areas are very secure.
- Certain types of activities occur regularly.
- You will (or will not) expose their child to certain religious or moral values.
- Parents can participate regularly in the center's activities.
- There is a strong, positive male or female role model for their child.
- Their child won't have to take naps.

Let parents know right away which of the desires they express you can meet and which ones you cannot. They can then better decide whether your center is right for them.

Let the parents know you are there to provide a service for them and their child. Also let them know you are a professional operating a business. If they choose to enroll their child in your center, it should mean they understand your program and policies and agree to operate according to them.

At the end of these initial contacts, you and the parents will have to decide whether to enroll the child. Your concerns may be:

- There does not seem to be a good "match" between your center's philosophy and the type of child care the parents want.
- The parents appear unwilling or unable to cooperate with your center's policies.
- The child seems too immature, frightened, disruptive, or aggressive to fit in well with children already in your care.

If you have concerns, you might agree to care for the child, but only for a specified, trial period. Then you and the parents can decide together whether a permanent placement is wise.

Enrolling a Child

If the parents choose to enroll their child, give them a registration packet. You may want to include all the forms and authorizations you need for the child to start your program.

Required Forms:

* Registration form (Chapter 9).
* Certificate of immunization status form (Chapter 15).
* Medical emergency authorization form (Chapter 14).
* Health history form (Chapter 9).
* Blanket field trip authorization form (Chapter 9).

Registration Form

Date: enrolled _____ , terminated _____

Child's name: _____ Age: _____ B.D.: _____

Parent(s) name(s): _____

Child's primary residence: _____

Other: _____

Home phone: _____

Is child living with both parents? _____ If not, with whom? _____

Mother's day phone: _____

Employer address: _____

_____

Father's day phone: _____

Employer address: _____

Emergency Person: _____ Telephone: _____

Emergency Person: _____ Telephone: _____

Names and phone numbers of person permitted to pick up your child from center:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name, address and phone number of your child's physician: _____

_____

Date of last physical exam: _____

Does your child have any specific health problems which the staff should be aware of? (i.e. vision or hearing loss, allergies, physical limitations, etc.): _____

_____

Please list names and ages of other members of your family that your child relates to: _____

_____

_____

_____

List any specific fears, likes, or dislikes your child has that might help us to know him/her better:

_____

_____

How does your child act when ill? _____

_____

Does your child take naps? _____ What is an averge nap time? _____

Has your child had any previous group experiences? (i.e. co-ops, Sunday school, daycare home)

_____

What was the reaction? _____

_____

Who disciplines your child at home? _____

What method is used at home? _____

Is your child fully toilet trained? _____

If so, at what age did this occur? _____

Does your child have a good appetite? _____

What are your child's interests and favorite activities? _____

_____

_____

_____

Annual Information Update

Child's name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____

Mother's day phone: _____

Father's day phone: _____

Emergency person: _____

Day phone: _____ Relationship: _____

Physician: _____ Phone: _____

People permitted to pick up child:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Special concerns: _____

_____

Date last seen by a doctor/last physical exam: _____

Medical concerns: _____

_____

Allergies: _____

Recent Immunizations: _____

New sister or brother? _____

New family living arrangements? _____

Date: _____ Parent signature: _____

DSHS requires you give parents written policies and that you explain these policies to them. Have enough copies on hand for all new parents and for replacements. Put all your policies and procedures in a single handout, called your "Parent Handbook" or "Parent Information Guide."

Parents need some way to keep all your policies in one place for future reference. A three-ring binder, a pocket folder, or simply stapling them together will work. If you hand out your written policies at different stages of enrollment, you should give the parents a folder with the first set of papers. Ask them to add later handouts to the folder.

Some information (like your tuition rate or holiday schedule) changes from year to year. Make sure this information is current on all forms you give to parents. You may want to hand out these as separate pages.

Policies and procedures which you MUST include in your parents information guide:

* If you did not give parents their own copy of the fee and payment plan (or any of the other required written policies we already mentioned), they need it now.
* Enrollment and admission requirements, and policies about reasons for removing a child from the program.
* Have parents sign that they have received, read and understand parent policies.

In most cases, parents take their children out of the center because of a pattern of behavior, not a single incident. Before dismissing a child, the director should have already taken the following steps:

- *Document the incidents. Include dates and what attempts the director made to solve the problem.*
- *Give the parents a clear statement of expected behavior.*
- *Give the parents reasonable advanced warning, so they have time to arrange alternate care.*

On a broader level, if your center loses a customer it is good business to find out WHY. Never underestimate the power of word-of-mouth to affect your center's reputation in the community. If you know parents are withdrawing their child, try to arrange an informal exit interview. Ask them their reasons for withdrawing their child. What things did they like about your program? What things bothered them?

If parents leave without notice, consider sending them a letter. Ask them for input about the child's experience at the center. Ask for ways to improve your services.

* Typical activity schedule for age group of enrolling child, including times of meals and snacks. (Chapter 5).
* Statement that parents are free to visit any part of your center their children use without prior notice.
* Breakfasts, lunches and snacks. Guidelines on food brought from the child's home.
* How and where to sign their child in and out, and why it is so important (Chapter 10).
* How the center handles sick children, medicines, minor injuries, and major medical emergencies (Chapter 14).
* The center's behavior management and discipline policies (Chapter 8).
* Transportation and field trip arrangements (Chapter 9).
* If the center cares for infants and toddlers, a description of diapering, toilet training, and feeding procedures (Chapter 19).
* A description of any religious content in your program. Include a description of holiday celebrations.
* A statement of nondiscrimination, perhaps explaining how your program actively works to break down stereotypes on sex, race, culture, religion, marital status, or handicap (Chapter 31).
* Your procedures and obligations for reporting suspected child abuse or neglect to Child Protective Services (Chapter 32).

Guidelines for Developing Written Information to Parents

INTRODUCTION

Child day care centers are required to provide parents with written information about their facility as specified in Washington Administrative Code (WAC) 388-295-2080. The following underlined items are required. Under each required item is an outline of recommended information to include under each required item. This specific information may vary depending on the unique services provided by your facility. You may add other information that you wish parents to have.

A guide to writing your policies is: What information would I need to have or would be helpful if I were a parent enrolling a child in my center? NOTE: Keeping the communication lines open between you and parents is a key step in developing trust and in working together to provide the best, developmentally appropriate care for children.

1. ENROLLMENT AND ADMISSION REQUIREMENTS

A. State the ages of children served.
B. State your policy on trial visits.
C. State whether or not you take part-time or drop-in children.
D. State whether or not you take children whose care may be subsidized.
E. List the forms parents are required to complete at enrollment. These include, but are not limited to, the following:
   (1) Registration form, including the child's health history.
   (2) A signed fee and payment plan.
   (3) A complete record of immunizations.
   (4) Written consent for children to receive emergency medical care.
   (5) Signed consent for children to go on field trips, including walks and swimming.
   (6) A signed agreement for the child care provider to furnish transportation. Specify the type of transportation, which may include public or chartered bus, van, parent, or staff vehicles, etc.

2. FEE AND PAYMENT PLAN

A. Rates
   (1) Do you charge by the hour, half-day, week, or month?
   (2) State your policy on refunds.
   (3) Is there a sliding fee scale?

B. State if you charge for additional services such as registration, field trips, diapers, special activities, etc.
C. State when payment is due, and how payment is to be made.
D. State your policy on overtime charges when parents are late picking up their child.
E. State your policies on vacation notification and sick days.

F. State when you plan to re-evaluate rates and how much advance notice you will give.
G. State your policy on terminating child care.
   (1) Conditions and notice you will give parents.
   (2) Notice you expect from parents. Is there a penalty fee if parents do not give adequate notice?

3. A TYPICAL DAILY SCHEDULE

A. Provide parents with a typical daily schedule which includes:
   (1) Hours of operation
   (2) Times when meals and snacks are served
   (3) Time when naps are taken
   (4) Activities you plan to provide for infants, toddlers, preschoolers, and school age children. It may be more practical to prepare a separate schedule for different age groups.

4. MEALS AND SNACKS SERVED

A. List meals and snacks you will provide, including breakfast or dinner.
B. Describe a typical breakfast, lunch, and snack.
C. List foods parents are expected to provide. Include requirements and suggestions for providing nutritious foods, including what kinds of food not to send.
D. Indicate that you will monitor foods brought from home to ensure safe preparation, storage, and nutritional adequacy.
E. Indicate that you will supplement foods brought from home that do not meet nutritional requirements, and will provide food to children who may come without a meal. State extra charge for supplement.
F. Indicate that you will prepare snack and meal menus at least one week in advance, and indicate where menus will be posted for parents to review.
G. Describe how you provide for children with food allergies.

5. PERMISSION FOR FREE ACCESS BY THE CHILD'S PARENT TO ALL CENTER AREAS USED BY THE CHILD

Indicate that parents have free access at all times to all areas of the center that their child uses.

6. SIGNING IN AND SIGNING OUT REQUIREMENTS

A. Indicate that parents are required to sign their complete signature when they bring and pick-up children.
B. Indicate the location of the sign-in/sign-out record.
C. Indicate that for school age children, staff will sign-out children when they leave for school, and sign-in the children when they return from school.
D. Indicate that children are not permitted to sign themselves in and out of the child care center.
E. Indicate that you will only release children to persons authorized on the registration form, unless given written permission to release the child to another person by the parent or guardian who enrolled the child. Indicate that you and your staff may ask for verification of identity.
F. State your policy on not releasing children to parents or any other person who is under the influence of drugs or alcohol, if this is your policy.

7. CHILD ABUSE REPORTING LAW REQUIREMENTS

A. Explain that you and your staff are required by Washington State Law and licensing requirements to report immediatley to the police or Child Protective Services any instance when there is reason to suspect the occurrence of physical, sexual, or emotional child abuse, or child neglect or exploitation.
B. Explain that you may not be able to notify parents when the police or Child Protective Services are called about possible child abuse, neglect, or exploitation. This depends on the recommendation of Child Protective Services.

8. BEHAVIOR MANAGEMENT AND DISCIPLINE

A. Describe the disciplinary practices you will use.
B. Indicate that you will not use any form of corporal punishment which includes, biting, jerking, shaking, spanking, slapping, hitting, kicking, or any other means of inflicting physical pain.
C. Indicate that any form of corporal punishment is not permitted on the premises of the child care center by anyone, including parents.
D. State your policy for conferring with parents regarding children who have problems with behavior management. Indicate steps you will take to resolve problems.

9. NONDISCRIMINATION STATEMENT

State that you will provide child care to any child regardless of race, sex, national origin, religion, or physical, mental or sensory disability.

10. RELIGIOUS ACTIVITIES

A. Describe any religious activities, including grace before meals, religious stories or songs, religious instruction, etc.
B. State your policy for parents or children who do not want to paricipate in a religious activity, and what alternatives you will provide.

11. TRANSPORTATION AND FIELD TRIP ARRANGEMENTS

A. If you provide before or after school care, indicate whether or not you provide transportation, or if transportation is provided by parents or schools. If you provide transportation, indicate to and from which schools you provide transportation.
B. For field trips, indicate how transportation will be provided (day care center vehicle, staff vehicles, parents, chartered bus, or public transportation).
C. State safety measures used when transporting children, including seat belts, car safety seats, current first aid and CPR training requirements, fire extinguisher, spare tire, first aid kit, etc.
D. State requirements for drivers to have a current Washington State driver's license, medical and liability insurance, and vehicles to be in safe operating condition.
E. State your requirement for written parent permission for field trips.
F. Policy on children who cannot or choose not to go.

12. PRACTICES CONCERNING AN ILL CHILD

A. Describe your policy for staff to conduct a daily health check of children when they arrive at the facility.
B. Describe your policy for excluding ill children. (Following are examples of symptoms that might indicate the need for exclusion):
   (1) Fever of 101 degrees F. or higher.
   (2) Vomiting on 2 or more occasions within the past 24 hours.
   (3) Diarrhea – 3 or more watery stools in a 24 hour period.
   (4) Draining rash.
   (5) Eye discharge or pink eye.
   (6) Too tired or sick to participate in daily activities.
   (7) Lice or nits.
   (8) Communicable diseases.
C. State how you will deal with a child who becomes ill at your center, to include:
   (1) Notifying the parent to pick-up a child who becomes ill at the center.
   (2) Ill children will be separated from other children and cared for in_____(indicate where ill children will be cared for until parent arrives.)
   (3) State how you will record illnesses.
   (4) State that you will report communicable diseases to the local health department, and notify all parents so they can take appropriate action to protect their children.

13. MEDICATION MANAGEMENT

A. State how you will store and give medication to children.
B. Indicate that all medication must be in its original container and properly labeled with the child's full name, date prescription was filled or medication's expiration date and legible instructions for administration.
C. For non-prescription medication, indicate that the following classifications of medication can be given with written parent consent, only at the dose, duration, and method of administration specified on the manufacturer's label for the age or weight of the child needing the medication:
   (1) Antihistamines
   (2) Nonaspirin fever reducers/pain relievers
   (3) Decongestants
   (4) Anti-itching ointments or lotions, intended specifically to relieve itching.
   (5) Diaper ointments or lotions, intended specifically for use in the diaper area of the child.
   (6) Sun screen
   (7) Nonnarcotic cough suppressants.
D. Indicate that a physician's written authorization is required for non-prescription medication that is not included in the above list, or if it is to be taken differently than indicated on the manufacturer's label, or if it lacks labeled instructions. For example, some labels indicate that for children under 2 years of age, you are required to consult a physician. In that case, a physician's written authorization would be required.

14. MEDICAL EMERGENCIES

A. LIfe threatening emergencies
   (1) Describe how you and your staff will handle major emergencies.
   (2) Describe what you will do and who you will contact if you cannot reach parents.
   (3) State how you will document major emergencies.

B. Minor Emergencies
   (1) Describe how you and your staff will handle minor emergencies.
   (2) Describe what your will do and who you will contact if you cannot reach parents.
   (3) State how you will document minor emergencies.

C. List hospitals used for emergencies (when a choice is possible). State that if parents have a preference other than those hospitals listed, the child care facility will try to accomodate parents, if possible.

   Name and Phone_____
   Address_____

15. POLICIES REGARDING INFANTS AND TODDLERS

A. If the center is licensed for infant or toddlers, include the following:
   (1) POLICY ON DIAPERING
      (a) Indicate if diapers are provided by parents or the center.
      (b) Do you use a diaper service or disposable diapers?
      (c) Indicate if parents or the center supplies plastic pants if disposable diapers are used.
      (d) Describe your diaper changing policy and procedures.
      (e) Indicate if soiled diapers will be returned to parents at the end of the day.

   (2) POLICY ON TOILET TRAINING
      Describe your policy on toilet training, which is initiated when the child indicates readiness, in consultation with the child's parent. Indicate whether you or parents supply training pants.

   (3) POLICY ON FEEDING
      (a) Indicate that you and parents will agree on a schedule for feeding infants.
      (b) Indicate whether the parent or center will supply bottles, nipples, milk, formula or bottled foods.
      (c) Indicate your policy on labeling bottles and foods either brought from home or prepared at the center.
      (d) Indicate your policy about providing semi-solid foods to infants, in consultation with the parent (not before the child is 4 months of age and not later than 10 months of age, unless otherwise recommended by the child's health care provider).
      (e) Indicate your policy on mothers who wish to breast feed their infants.

16. OTHER INFORMATION YOU MAY WANT TO GIVE PARENTS

The following information is not required, but may be helpful to parents and your program:

A. A description of your activity program, developmental approaches with children, cultural relevancy, and how you will serve children with special needs.
B. A description of how you will group children according to age and/or stage of development, the staff to child ratio, and the group size that you will maintain for the various age groups in care.
C. A description of how you plan to communicate with parents, how parents can communicate with you and your staff about their children, and any concerns they may have.
D. State ways that parents can become involved in their child's center. These may include parent advisory boards, classroom observation, parent training provided at the center, volunteering for field trips and center activities, etc.
E. List items that parents must provide, including bedding for naps, containers for soiled diapers, changes of clothes, outdoor wear, tooth brushes, etc.
F. State your policy on labeling of clothing, bedding, etc.
G. State your policy on infection control. Include hand washing procedures; sanitation of toys and equipment, general cleanliness of center, TB testing of staff and volunteers, and HIV/AIDS training for staff and volunteers.
H. State your policy on children bringing their own toys, and who is responsible if toys are lost or broken.
I. State your policy on bringing gum, candy, birthday treats, etc.
J. State your policy on items not to bring to the center.
K. Describe your qualifications and background; give information about staff persons.

You may want to have the parents sign and date the fee and payment plan so it serves as a written contract. A reference to your parent information guide is part of the agreement as well. A signed, written contract is a legal document. Its main purpose is to make the agreement between you and the parents perfectly clear and business-like. Sign and date the agreement as well. Give the parents their own copy.

Policies and procedures you MAY want to include in your handouts:

- Center calendar, vacation schedule, parent conferences, library day, etc.
- Importance of fresh air and outdoor exercise for children; general rainy day policy; whether parents can request you keep their child inside on a particular day.
- Importance for both child and staff to be clear on what days the child will be present. Request that parents let you know when their child will have an extended absence.
- Importance of telling you when information on file about them or their child changes (for example, additional immunizations, or a new work phone number).
- Encouraging parent observations and parent participation in the program.
- Procedures for parents to arrange a conference with their child's care giver or the center director.
- Reasons the center may decide it can no longer provide care for the child.
- Lost and found procedures.
- How your center celebrates birthdays.
- Center policy on personal care items such as hairbrushes or toothbrushes.
- Response to local and national emergencies (including snow day policy).

You might also want to find out from the parents:

- What talents they might be willing to share with the center.
- Whether they are available to help at lunchtimes occasionally or drive for field trips.

Preparing for a Child's First Day

Both parents and the children need to be comfortable and prepared for this new adventure. Tell the parents to prepare their child for the first day of center:

- Invite the child to visit before the first day.
- Show the parents what room or areas the child will be in and the care giver's name.
- Suggest how parents should say goodbye the first day. Tell parents if you want them to stay for a while the first few days.

- Ask parents to tell their children when they will return at the end of the day. They should make extra efforts to be prompt. Also remind parents that it is unsettling for a new child to be the last person to go home.
- Ask parents to label all clothes and personal belongings. Jackets and lunch boxes also need the child's name on them.
- Tell parents things children should bring with them their first day, such as a lunch, slippers, or a special nap pillow. Special security items will help them feel more comfortable in your setting.
- Ask parents to send an extra set of clothes appropriate for the season. Tell parents the procedures for sending home wet or soiled clothes.
- Let parents know things children should not bring to the center, such as toys or candy.

RESPECT A FAMILY'S RIGHT TO PRIVACY AND CONFIDENTIALITY IN THE INFORMATION THEY SHARE WITH YOU OR IN DISCUSSING THEIR CHILD.

Parents worry about changes in their child's behavior the first few days or weeks in your program. Reassure them that an adjustment period is normal and temporary.

Also remind parents that it is very important that they return all forms and authorizations by the child's first day.

The Process of Keeping Parents Informed

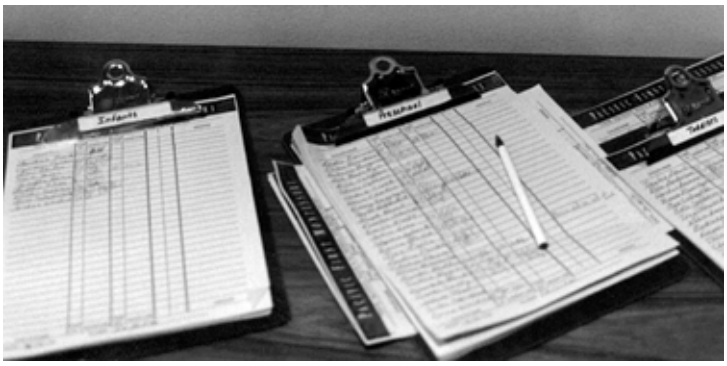
You probably will have daily opportunities for person-to-person contact with parents. Take time to listen and respond when parents want to talk about your services or their child. Schedule a time when you and parents can sit down and discuss their concerns.

The best way to gain parents' confidence and respect is to show that you respect them. This means you:

- Respect parents' views, even when they conflict with your own.
- Respect each family's cultural background, religious beliefs, and child rearing practices.
- Support the children's family. Their primary care givers may be single, married, unmarried, stepparents, grandparents, foster parents, or guardians.
- Make positive, supportive comments to parents about their child.
- Respect a family's right to privacy and confidentiality in the information they share with you or in discussing their child. Share information only with those who have a right to know and who need the information to do their job.
- Establish a parent resource library.
- Clearly separate your personal life from your professional relationship with the parents.

Parents will tell you certain details about their children's care that are very important to them. It may be they want your help seeing that their children:

- *Don't lose a new jacket.*
- *Don't nap more than an hour, because when they do they're up all night.*
- *Wear their boots and mittens and hat when they go outside.*
- *Keep their shoelaces tied.*



You will not be able to grant some parent requests because they are against center policy. Your cooperation with parents on the little things that matter to them will go a long way. They will feel their child is well cared for at your center.

Here are some ways you can keep open the lines of communication with parents.

Sign-In/Sign-Out

Parents are required to sign children in and out each day. Therefore, sign-in/sign-out sheets are a perfect place to pass important information back and forth each day. You can add a column to the sheet for such messages as:

- Reminders to give medicine or to take medicine home.
- Parents authorizing other people to take their children home.
- Requests from parents that their children not go outside that day.
- Notes from parents that their children will be going home early.
- Reminders for parents to bring in extra clothes.

Some messages will be personal or too long to fit on the sheet. The person leaving the message can write on the sheet that a folded note is attached with the person's name on it.

You can also use the sign-out sheets to tell parents about something interesting their children did or said that day. It takes a little time, but it gives parents a sense their child is important to you and helps you inform them about their child's "other world."

Usually a single set of sign-in/sign-out columns is sufficient for signing children in and out. However, before-and-after school children need morning columns for parents to sign them in and providers to sign them out. They also need afternoon columns for providers to sign them back in and parents to sign them out. In addition,

Daily Attendance

Date	Child's Name	DOB	Time In	Parent (or auth. adult) Signature	Time Out	Parent (or auth. adult) Signature

centers need "sign-out/sign-in" sheets when they take the children off site and bring them back. These could be a separate set of forms or a set of sign-in/sign-out sheets with an arrow indicating the columns are reversed.

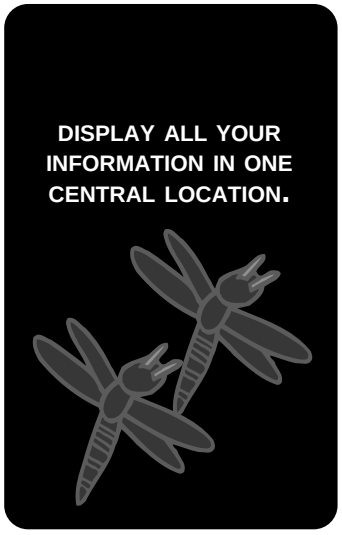
You might want to put children's birthdays (including the year) on the sign-in/sign-out sheets. This can serve as a reminder to providers of the ages of children. It also is useful to licensors in checking the age distributions in a group.

Bulletin Board

Your center benefits from a central information center (somewhere near the sign-in/sign-out sheets is a likely location). You may want to display all your information in one central location, or you may want to spotlight items parents are more likely to be interested in.

In addition to things you must post, which appear in WAC 388-295-7080, the following items you can post will interest parents:

- General announcements, upcoming parent meeting, field trip, or parent conference schedule.
- Payment envelope or driver sign-up sheet for field trips.
- Copy of newsletter.
- Pictures/names of staff.
- Photo display of recent center activities. Parents love it if they can occasionally have one of these pictures to keep.
- Names of new children just starting your program and their parents.
- Credentials of staff.
- Accreditation of program.
- Memberships in education or professional associations.
- Information concerning child or family health. Immunization reminders, product safety, healthy recipes, or health care resources are useful.
- A newspaper article or a flyer on some upcoming family event.
- Designated area for parents to post information.



Getting an important message to parents can be tough. Parents are busy with their own activities. The parent who drops off the child may not be the same parent who picks up the child at night. Announcements must be big, bright, and posted where parents can't ignore them.

Don't assume that letting the parents know once means they'll remember. Strongly encourage parents to mark upcoming events on their calendar. Send home a calendar with center events marked. Ask parents to put it in a place where they will refer to it regularly at home (for example, on the refrigerator door).

Inviting Parents to Observe

Allow parents to visit your center at any time. Advise them of a good time to observe or visit.

Some centers use a handout covering observation guidelines. Talk with parents before their visit about what they would like to watch. Give rules about observers. Allow parents an opportunity to talk to a staff person about what they saw and ask questions.

You cannot afford to manage your program poorly especially at the beginning or end of the day. For parents, seeing is believing. You can tell parents about your wonderful program. If children are watching TV while the staff cleans the center, parents become unhappy customers. Emphasize to staff that nothing concerns parents more than staff not being able to tell them where their children are when they come to pick up their children.

Newsletter

One good way to get information to parents routinely is through a monthly newsletter. It can cover a variety of topics:

- Summary of activities children have done in the past month.
- Suggestions for how parents can follow up on what children have learned.
- Notes from staff members about things that have happened in their rooms.
- Announcements about activities planned for the month to come.
- Ways parents can help out.
- Important dates for parents to mark on their calendars.
- Pats on the back for parents who have helped out recently.
- Child care information parents might find useful. Discipline techniques, sack lunch or snack recipes, or illness prevention are popular topics.
- Gentle reminders about center policy. You can often phrase these as thank-yous to parents doing a good job.

Your newsletter makes announcements to parents. It is also a good parent education tool.

Your parents might like a list of parents' names and phone numbers, along with their children's names. This allows parent contact to arrange carpools and to invite each other's children to their homes.

Make sure everyone you include on a roster gives you permission to list their phone number and address. You may want to include a line on your enrollment form for parents to give you written permission to distribute this information.

Parent Meetings

Parent meetings may be a mix of business and topics of interest to your parents. For example, you might want to have meetings devoted to:

- Dealing with common problems. Getting children to bed or getting them to eat healthy foods are high interest topics.
- Teaching children about personal safety.
- Developing an anti-bias perspective.
- Behaviors to expect at different stages of development, and how to deal with them.

Name tags are a good idea at parent meetings. Have parents write down not only their own name but their child's. Parents can start to associate the names of their children's friends with the faces of their parents.

Not every parent get-together needs to be a business meeting. You might want to organize a social event. Picnics in the park offer a fun and informal way for families and staff to get acquainted.

Parent-Provider Conferences

Of course, much information can and should pass between parents and the center on a regular basis. You may want to schedule regular parent conferences. Organize ahead of time what points you want to cover. You might want to include in the discussion:

- Specific observations about their child's social, emotional, mental, and motor progress. Begin the conversation with a positive comment to put the parents at ease.
- Activities of interest to their child and particular skills.
- Discussion of the their child's developmental stage and resulting changes in their child's behavior.
- Any concerns the parents would like to discuss.
- Discussion of things you plan to concentrate on in the near future. Cover their child in particular and the group in general.

Although the parents were comfortable enough with your program to enroll their child, disagreement may arise on some issues, such as:

- What is considered aggressive behavior.
- How children should talk to adults.
- Acceptable methods of setting limits.
- Whether different behaviors are more appropriate for boys than for girls.
- Learning goals for their child.

Be respectful of these differences while communicating your own observations and goals. Let parents know in what areas you can accommodate their wishes. Also tell them the areas you feel strongly about and will not change. The parents are then able to make an informed choice whether they wish their child to stay in your center.

Parents may feel you are grading them and their child at conference time. Do what you can to put them at ease. Let them know that the purpose of the conference is to help both parents and providers know the child better.

Also, let parents know they can request a conference with their child's caregiver or the center director any time.

Parent Involvement in Your Program

Most parents are willing and pleased to help. Most won't volunteer, however, until you let them know you want their help. If you want the parents to get involved, give them a list of ways they can help for example, they could:

- Be on the board.
- Be a child care helper. Parents who regularly help receive the same orientation you give all staff members.
- Be a lunch helper.
- Be a materials maker.

- Help with bookkeeping or typing.
- Contribute to topics children are currently exploring (fossils from home, books, or stamp collecting).
- Help with repairs.
- Share their cultural heritage or travel experiences in cooking projects, clothing, songs, slides, books, or special objects.
- Helping with holiday celebrations.
- Contributing their time and skills to special projects such as art, music, dance, cooking, weaving, or woodworking.
- Help with trip planning, organization, or driving.
- Help with fund-raising.
- Help their child at home on some skill their child learned at the center.
- Attend a parent work night.

In general, parent involvement improves the quality of the program.